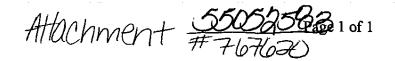
FILED

7/21/03 172-597-2841

2003 NOT-FOR-PROFIT CORPORATION **UNIFORM BUSINESS REPORT (UBR)**

SIGNATURE:

Jul 28, 2003 8:00 am **Secretary of State** DOCUMENT # 767620 05-05-2003 91908 039 ****61.25 1. Entity Name THE RIGHT PATH, INC. Principal Place of Business Mailing Address 21 N. HEPBURN AVE 21 N. HEPBURN AVE SUITE 2 SUITE 2 JUPITER FL 33458 JUPITER FL 33458 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES 4. FEI Number 59-2276085 City & State City & State Applied For Not Applicable \$8.75 Additional Country Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent WILEY LEE, H. GREGG, ESQUIRE Street Address (P.O. Box Number is Not Acceptable) 2014 4TH ST. 21 N. HEPBURN AVE., STE 20 SARASOTA FL 34237 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am the obligations of registered agent. (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to After September 10, 2003, min will be \$236.25 Trust Fund Contribution. Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. DONNA WILEY CHANGE STATE CR2E037 (4/03) TITLE 20 Delete TITLE *O* MURROW, HUGH NAME 3342 SW HOSANNAH LANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA FL 34237 CITY-ST-ZIP JOHN ABUSO Change Addition 11 LEXINGTON RANE EAST PARM BEACH GARDENS, FL 37410 TITLE X Delete LEE, H GREGG NAME NAME 2014 4TH ST. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP SARASOTA FL: 34237 CITY-ST-ZIP -TITLE Delete TITLE CAREY, LILLIAN B NAME NAME STREET ADDRESS 3342 SW HOSANNAH LANE STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP SARASOTA FL 34237 TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.





Close

ONLINE IMAGE ACCOUNT NUMBER:

2000141934693

Check Number

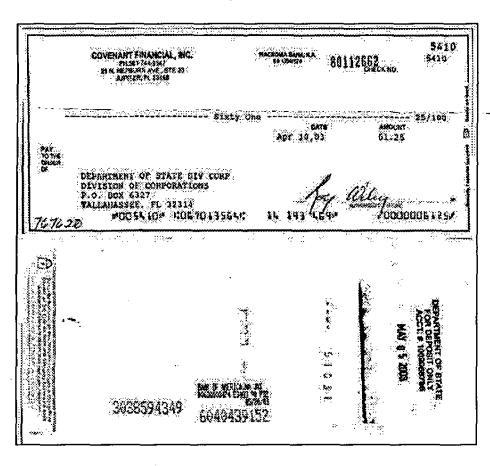
Amount

Date Posted

5410

\$61.25

05/20/2003



Print page

How to save

FAOs

I AIS NOT PECETOR ROTIZICATION THAT THIS

UBR FOR THE RIGHT PATH INC NEEDED CHANGING. THE

FIRST NOTICE I RECEIVED WAS THE ONE LOT SEPT 10.

THE CHECK FOR PAYMENT WAS CASHED.