

2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000050195

FILED
May 13, 2006
Secretary of State

Entity Name: PATHWAY TO INDEPENDENCE LLC

Current Principal Place of Business:

1849 SE DRANSON CIRCLE
PORT SAINT LUCIE, FL 34952 US

New Principal Place of Business:

Current Mailing Address:

1849 SE DRANSON CIRCLE
PORT SAINT LUCIE, FL 34952 US

New Mailing Address:

FEI Number: 20-3050649 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

LEGAL ZOOM NEVADA, INC.
44 W. FLAGLER STREET
SUITE 675
MIAMI, FL 33130 US

Name and Address of New Registered Agent:

HANCOCK, TRACEY
2099 SE MADISON ST
STUART, FL 34996 US

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.

SIGNATURE: TRACEY HANCOCK

05/13/2006

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: HANCOCK, JEFFREY
Address: 1849 SE DRANSON CIRCLE
City-St-Zip: PORT SAINT LUCIE, FL 34952 US

ADDITIONS/CHANGES:

Title: OWNE (X) Change () Addition
Name: HANCOCK, JEFFREY
Address: 1849 SE DRANSON CIRCLE
City-St-Zip: PORT SAINT LUCIE, FL 34952 US

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JEFFREY HANCOCK

OWNE

05/13/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date