

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005844

Entity Name: PATHWAYS TO PROGRESS, INC.

FILED
Apr 28, 2004
Secretary of State

Current Principal Place of Business:

3455 26TH AVE SOUTH
ST PETERSBURG, FL 33711

New Principal Place of Business:

Current Mailing Address:

3455 26TH AVE SOUTH
ST PETERSBURG, FL 33711

New Mailing Address:

FEI Number: 75-5069449

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAMPBELL, SIDNEY P
2161 67TH AVE SO
ST. PETERSBURG, FL 33712 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: CAMPBELL, SIDNEY P
Address: 2161 67TH AVE SO TH
City-St-Zip: ST PETERSBURG, FL 33712

Title: VPD () Delete
Name: MCCULLOUGH, LEON
Address: 2111 37TH AVE SO
City-St-Zip: ST PETERSBURG, FL 33711

Title: TD () Delete
Name: WILLIAMS, JACQUELYNE
Address: 4635 ALCAZAR WAY SO.
City-St-Zip: ST PETERSBURG, FL 33712

Title: D () Delete
Name: SHORTER, CHARLES
Address: 4148 NARVAEZ WAY SO
City-St-Zip: SAINT PETERSBURG, FL 33711

Title: D () Delete
Name: CHAPMAN, ARLETHA
Address: 2711 QUEEN ST SO
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: S () Delete
Name: ARRINGTON, GAYLE
Address: 2619 NORTH BAY S
City-St-Zip: TAMPA, FL 33610

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: LEON MCCULLOUGH

VPD

04/28/2004

Electronic Signature of Signing Officer or Director

Date