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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

DOCUMENT # N02000008024

1. Entity Name
ARCHWAY TO TOMORROW, INC.

Principal Place of Business	Mailing Address
870 N COCOA BLVD COCOA, FL 32922	870 N COCOA BLVD COCOA, FL 32922

2. Principal Place of Business	3. Mailing Address
7018 S Florida AVE	1399 Ashboro cir SE
Suite, Apt. #, etc. C	Suite, Apt. #, etc.
City & State: Rockledge, FL	City & State: Palm Bay, FL
Zip: 32955 Country: Brevard	Zip: 32909 Country: Brevard

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number: 75-3085551 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ALRON ENTERPRISES, INC.
390 NARRAGANSETT ST. NE
PALM BAY, FL 32907

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City FL Zip Code

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 familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE

FILE NOW: FEE $0.00

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

Make Check Payable to: Florida Department of State

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition
	☐ Delete		☐ Change ☐ Addition

PRESIDENT/D
CECELIA DANES
1399 ASHBORO CIR SE
PALM BAY, FL 32909

VICE PRESIDENT/D
JUDITH MATTISON-SAVAGE
325 ANGELO LANE
COCOA BEACH, FL

S/Patrick Savage
325 Anglo Lane, Cocoa Beach, FL

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.

SIGNATURE: Cecelia Danes 4/27/03 321-952-4767
(Signature, and Typed or Printed Name of Individual Executing Document) (Date) (Daytime Phone #)

Cecilia gave permission to correct doc.

4/27/03