

**2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 25, 2009  
Secretary of State**

DOCUMENT# N03000002088

Entity Name: PATHWAY TO CHRIST MINISTRIES INC.

**Current Principal Place of Business:**

3838 W HUMPHREY ST  
TAMPA, FL 33614

**New Principal Place of Business:**

**Current Mailing Address:**

P.O., BOX 1235  
SEFFNER, FL 33585

**New Mailing Address:**

FEI Number: 73-1667167      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

ANDERSON, GREGORY  
669 LAKEMONT DR  
BRANDON, FL 33510      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: P      ( ) Delete  
Name: ANDERSON, GREGORY L SR.  
Address: 669 LAKEMONT DR  
City-St-Zip: BRANDON, FL 33510

Title: VP      ( ) Delete  
Name: NEWKIRT, TIGER ELDER  
Address: 4316 EAST GROVEVIEW AVE  
City-St-Zip: TAMPA, FL 33617

Title: D      ( ) Delete  
Name: PROPHET, JOHNNIE S  
Address: 14688 COPELAND WAY  
City-St-Zip: SPRINGHILL, FL 34604

Title: D      ( ) Delete  
Name: SULLIVAN, DENOISE  
Address: 7400 NT. CENTRAL AVE  
City-St-Zip: TAMPA, FL 33604

Title: D      ( ) Delete  
Name: ANDERSON, SHEILA M  
Address: 669 LAKEMONT DR  
City-St-Zip: BRANDON, FL 33510

Title: D      ( ) Delete  
Name: ATKINS, JAMES E  
Address: 668 LAKEMONT DR  
City-St-Zip: BRANDON, FL 33510

**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 exemption stated in Chapter 119, 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: GREGORY ANDERSON

PRES

04/25/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date