## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N04000004835

Entity Name: GUIDED PATH ACADEMY, INC.

FILED Apr 26, 2005 Secretary of State

Littly Nai	ile. GOIDED	FATTI ACADEIVIT, INC	•				
Current Principal Place of Business:				New Principal Place of Business:			
1390 N SEACREST BLVD BOYNTON BEACH, FL 33435				1199 W. LANTANA RD BLDG. 3 BOYNTON BEACH, FL 33435			
Current Mailing Address:				New Mailing Address:			
1390 N SEACREST BLVD BOYNTON BEACH, FL 33435				1199 W. LANTANA RD BLDG. 3 BOYNTON BEACH, FL 33435			
FEI Number:	20-0855340	FEI Number Applied Fo	r ( ) FEI Nur	nber Not Appl	icable ( )	Certificate of Status Des	ired()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
2020 NW 2	M, TIMOTHY 2ND STREET I BEACH, FL	33435 US					
	named entity of Florida.	submits this statement	for the purpose o	f changing i	ts registered	d office or registered ager	it, or both,
SIGNATUR							
	Electron	nic Signature of Registe	ered Agent			Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS			
Title: Name: Address: City-St-Zip:	FORDHAM, TIN 2020 NW 2ND			Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	V ( BANKS, DAVID 7405 SUNNYH LANTANA, FL	LL TERR		Title: Name: Address: City-St-Zip:	SAVAGE, PA	INDIES WAY	
Title: Name: Address: City-St-Zip:	WHITE, JAMES 111 NE 17TH C			Title: Name: Address: City-St-Zip:		( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	BANKS, MELIN 1850 NE 48TH	) Delete IDA STREET APT 138 ACH, FL 33064		Title: Name: Address: City-St-Zip:	TR STEEDLEY, 213 N. BROA LANTANA,, F	ADWAY	
Title: Name: Address: City-St-Zip:	(	) Delete		Title: Name: Address: City-St-Zip:	COOK, RASH 257 NE 6TH		

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: TIMOTHY FORDHAM P 04/26/2005