

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006004

FILED
Apr 01, 2006
Secretary of State

Entity Name: TEMPLE OF THE SACRED PATH, INC. - ATC

Current Principal Place of Business:

2027 MATTISON DR NE
PALM BAY, FL 329053941

New Principal Place of Business:

Current Mailing Address:

2027 MATTISON DR NE
PALM BAY, FL 329053941

New Mailing Address:

FEI Number: 20-1264866

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, ROGER
2027 MATTISON DR NE
PALM BAY, FL 329053941 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: D () Delete
Name: ENGBORG, ROBERT
Address: 1667 PARADISE LN
City-St-Zip: DAYTONA BEACH, FL 32119

Title: D () Delete
Name: BLOWERS-POMAR, TAMMY
Address: 5140 TAYLOR AVE
City-St-Zip: PORT ORANGE, FL 32127

Title: D () Delete
Name: SCHLOSBERG, MARCUS
Address: 3108 NEW HOPE DR
City-St-Zip: DELTONA, FL 327384243

Title: D (X) Delete
Name: DRISCOLL, DEEJAY
Address: PO BOX 1566
City-St-Zip: ORMOND BEACH, FL 32175

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ENGBORG, ROBERT
Address: 2256 COCONUT BLVD
City-St-Zip: BUNNELL, FL 32110

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

Title: D (X) Change () Addition
Name: VALENTINE, VALERIE
Address: 5140 SHILO GLYNN LANE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

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 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: ROGER COLEMAN

RA

04/01/2006

Electronic Signature of Signing Officer or Director

Date