

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006004

FILED
Mar 29, 2009
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: 1655 SHANGRI-LA DRIVE
City-St-Zip: DAYTONA BEACH, FL 32119

Title: D () Delete
Name: ROSS, ANGELA M
Address: 2281 OLD SAMSULA RD
City-St-Zip: PORT ORANGE, FL 32128 US

Title: D () Delete
Name: VALENTINE, VALERIE
Address: 5140 SHILOH GLYNN LANE
City-St-Zip: NEW SMYRNA BEACH, FL 32168

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ENGBORG, ROBERT
Address: 1655 SHANGRI-LA DRIVE
City-St-Zip: DAYTONA BEACH, FL 32119 US

Title: D (X) Change () Addition
Name: STEVENS, TORY E
Address: 2822 8TH ST
City-St-Zip: ORLANDO, FL 32820 US

Title: D (X) Change () Addition
Name: VALENTINE, VALERIE
Address: 2596 SHILOH GLYNN LN
City-St-Zip: NEW SMYRNA BEACH, FL 32169 US

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: JOHN R. COLEMAN JR

RA

03/29/2009

Electronic Signature of Signing Officer or Director

Date