

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006603

FILED
Apr 27, 2006
Secretary of State

Entity Name: THE PATHWAYS PROJECT, INC.

Current Principal Place of Business:

350 FAIRWAY DRIVE
200
DEERFIELD BEACH, FL 33441

New Principal Place of Business:

Current Mailing Address:

1730 SOUTH FEDERAL HIGHWAY
#203
DELRAY BEACH, FL 33483

New Mailing Address:

FEI Number: 38-3723879

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOEL, CHERYL L
350 FAIRWAY DRIVE
200
DEERFIELD BEACH, FL 33441 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: DOEL, CHERYL
Address: 1730 SOUTH FEDERAL HWY., #203
City-St-Zip: DELRAY BEACH, FL 33483

Title: VP () Delete
Name: ANITA, SMART
Address: 1730 SOUTH FEDERAL HWY., #203
City-St-Zip: DELRAY BEACH, FL 33483

Title: VP () Delete
Name: DEBIE, LINDEN
Address: 1730 SOUTH FEDERAL HWY., #203
City-St-Zip: DELRAY BEACH, FL 33483

Title: VP (X) Delete
Name: EPSTEIN, JAMES A
Address: 1730 SOUTH FEDERAL HWY., #203
City-St-Zip: DELRAY BEACH, FL 33483

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:

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: CHERYL DOEL

PRES

04/27/2006

Electronic Signature of Signing Officer or Director

Date