

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000006603

FILED  
Apr 28, 2008  
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

**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:

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: CHERYL DOEL

P

04/28/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date