

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000006658

Entity Name: MOONPATH CIRCLE, INC.

FILED  
Jan 09, 2007  
Secretary of State

## Current Principal Place of Business:

1100 SE 5 CT - # 24  
POMPANO BEACH, FL 33060

## New Principal Place of Business:

## Current Mailing Address:

1100 SE 5 CT - # 24  
POMPANO BEACH, FL 33060

## New Mailing Address:

FEI Number: 20-5341275

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BARKLEY, G.H. KIP  
1100 SE 5 CT - # 24  
POMPANO BEACH, FL 33060 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: PT ( ) Delete  
Name: LETOURNEAU, SOPHIA E  
Address: 3970 NW 21 AVE  
City-St-Zip: FT LAUDERDALE, FL 33309

Title: VPT ( ) Delete  
Name: MISKIMENS, LISA  
Address: 3970 NW 21 AVE  
City-St-Zip: FT LAUDERDALE, FL 33309

Title: ST ( ) Delete  
Name: TAFFEL, MELANIE  
Address: 3970 NW 21 AVE  
City-St-Zip: FT LAUDERDALE, FL 33309

Title: T/T ( ) Delete  
Name: BARKLEY, G.H. KIP  
Address: 3970 NW 21 AVE  
City-St-Zip: FT LAUDERDALE, FL 33309

Title: T ( ) Delete  
Name: MCANULTY, MARTY  
Address: 3970 NW 21 AVE  
City-St-Zip: FT LAUDERDALE, FL 33309

Title: T ( ) Delete  
Name: GRIFFITHS, JANINE N.B.  
Address: 3970 NW 21 AVE  
City-St-Zip: FT LAUDERDALE, FL 33309

## 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:

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: G H KIP BARKLEY

T/T

01/09/2007

Electronic Signature of Signing Officer or Director

Date