

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N06000012742

FILED
Jan 31, 2008
Secretary of State

Entity Name: PATHWAYS FOR CHRIST INTERNATIONAL, INC

Current Principal Place of Business:

1007 W. ORANGE BLOSSOM TRAIL
APOPKA, FL 32172

New Principal Place of Business:

Current Mailing Address:

5805 STATE BRIDGE ROAD
G193
APOPKA, FL 32712

New Mailing Address:

5805 STATE BRIDGE ROAD
G193
DULUTH, GA 30097

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

WALDEN, CHANITA R
409 SAN SEBASTIAN PRADO
ALTAMONTE SPRINGS, FL 32714 US

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: CHANITA R. WALDEN

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: THOMAS, KEVIN
Address: 1280 FALCONCREST BLVD
City-St-Zip: APOPKA, FL 32712

Title: VP () Delete
Name: GOLDEN, QUENTIN B
Address: 315 N. 15TH STREET
City-St-Zip: LEESBURG, FL 34748

Title: VP () Delete
Name: HIZER, ROBERT E
Address: 204 LANCE OAK DR
City-St-Zip: APOPKA, FL 32712

Title: TREA () Delete
Name: SMITH, CHRISTINA L
Address: 447 WEKIVA SPRINGS ROAD
City-St-Zip: LONGWOOD, FL 32719

Title: SEC () Delete
Name: WALDEN, CHANITA R
Address: 409 SAN SEBASTIAN PRADO
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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:

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: CHANITA R. WALDEN

SEC

01/31/2008

Electronic Signature of Signing Officer or Director

Date