

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000010436

FILED  
Mar 20, 2011  
Secretary of State

**Entity Name:** PATH OF LIGHT MINISTRY, INC.

**Current Principal Place of Business:**

14356 HUNTINGFIELD CT  
ORLANDO, FL 32824

**New Principal Place of Business:**

**Current Mailing Address:**

14356 HUNTINGFIELD CT  
ORLANDO, FL 32824

**New Mailing Address:**

**FEI Number:** 27-1222460

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SETH, SANKAR  
14356 HUNTINGFIELD CT  
ORLANDO, FL 32824 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:** DP  
**Name:** SETH, SANKAR  
**Address:** 14356 HUNTINGFIELD CT  
**City-St-Zip:** ORLANDO, FL 32824

**Title:** DT  
**Name:** SETH, MERGENA  
**Address:** 14356 HUNTINGFIELD CT  
**City-St-Zip:** ORLANDO, FL 32824

**Title:** DS  
**Name:** SETH, MATTHEW  
**Address:** 14356 HUNTINGFIELD CT  
**City-St-Zip:** ORLANDO, FL 32824

**Title:** AP  
**Name:** MATTAI, RAGHOO  
**Address:** 741 RAINFALL DR  
**City-St-Zip:** WINTER GARDEN, FL 34787

**Title:** DM  
**Name:** TORRES, NORHA  
**Address:** 14355 HUNTINGFIELD CT  
**City-St-Zip:** ORLANDO, FL 32824

I hereby 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 all other like empowered.

**SIGNATURE:** SANKAR SETH

DP

03/20/2011

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

\_\_\_\_\_  
Date