

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005259

FILED  
Apr 15, 2005  
Secretary of State

Entity Name: SPIRITUAL PATH FOUNDATION, INC.

**Current Principal Place of Business:**

4461 S 25TH STREET  
FORT PIERCE, FL 34981 US

**New Principal Place of Business:**

**Current Mailing Address:**

4461 S 25TH STREET  
FORT PIERCE, FL 34981 US

**New Mailing Address:**

FEI Number: 65-0706246

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VIDAL, JUDITH E  
4461 S 25TH STREET  
FORT PIERCE, FL 34981 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: PD ( ) Delete  
Name: VIDAL, EUGENE  
Address: 4461 S 25 STREET  
City-St-Zip: FORT PIERCE, FL 34981

Title: STD ( ) Delete  
Name: VIDAL, JUDITH E  
Address: 4461 S 25TH STREET  
City-St-Zip: FORT PIERCE, FL 34981

Title: D ( ) Delete  
Name: BLAMIRE, JENNIFER E  
Address: 3152 DWARF PINE AVE.  
City-St-Zip: WINTER PARK, FL 32792

**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 for the exemption stated in Section 119.07(3)(i), 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: JUDITH E. VIDAL

REV,

04/15/2005

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

\_\_\_\_\_  
Date