

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003839

FILED
Apr 30, 2006
Secretary of State

Entity Name: PATHWAYS TO LIFE INC.

Current Principal Place of Business:

10851 NE 110TH AVE
ARCHER, FL 32618 US

New Principal Place of Business:

P.O. BOX 1286
BRONSON, FL 32621 US

Current Mailing Address:

10851 NE 110TH AVE
ARCHER, FL 32618 US

New Mailing Address:

P.O. BOX 1286
BRONSON, FL 32621 US

FEI Number: 59-3715228

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CLARK, DIANNE
11771 NE 93RD TERRACE
BRONSON, FL 32621 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: BOD (X) Delete
Name: HICKBOKER, GINGER
Address: 7890 NW 166TH STREET
City-St-Zip: TRENTON, FL 32693

Title: BOD () Delete
Name: OBERLIN, ANGELA
Address: 10692 ACME RD
City-St-Zip: WELLINGTON, FL 33414

Title: BOD () Delete
Name: FIE, MAUREEN
Address: 8891 NE 120TH AVE
City-St-Zip: BRONSON, FL 32621

Title: PTR () Delete
Name: CLARK, DIANNE DAILEY
Address: 11771 NE 93RD TERRACE
City-St-Zip: BRONSON, FL 32621

Title: VP () Delete
Name: DAILEY, JASON
Address: 11771 NE 118TH LANE
City-St-Zip: BRONSON, FL 32621

Title: D () Delete
Name: MOUNTAIN, BILLY BIG
Address: 1933 SW 9TH RD.
City-St-Zip: OCALA, FL 34474

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: DIANNE CLARK

PTR

04/30/2006

Electronic Signature of Signing Officer or Director

Date