

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003839

FILED
Jun 08, 2007
Secretary of State

Entity Name: PATHWAYS TO LIFE INC.

Current Principal Place of Business:

P.O. BOX 1286
BRONSON, FL 32621 US

New Principal Place of Business:

11771 NE 93RD TERRACE
BRONSON, FL 32621 US

Current Mailing Address:

P.O. BOX 1286
BRONSON, FL 32621 US

New Mailing Address:

FEI Number: 59-3715228 FEI Number Applied For () FEI Number Not Applicable () 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:

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 () 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: BOD (X) Change () Addition
Name: MOUNTAIN, MARY ANN BIG
Address: 1933 SW 9TH RD.
City-St-Zip: OCALA, FL 34474

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: DIANNE CLARK

PTR

06/08/2007

Electronic Signature of Signing Officer or Director

Date