

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004686

FILED
May 05, 2008
Secretary of State

Entity Name: PATHWAY TO PEACE PROGRAM, INC.

Current Principal Place of Business:

2511 E. 3RD ST.
PANAMA CITY, FL 32401

New Principal Place of Business:

Current Mailing Address:

2511 E. 3RD ST.
PANAMA CITY, FL 32401

New Mailing Address:

FEI Number: 59-2802343 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
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:

ROSIER, VERNETTE DR.
1303 WISCONSIN AVE.
LYNN HAVEN, FL 32444 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PC () Delete
Name: ROSIER, VERNETTE DR.
Address: 1303 WISCONSIN AVE
City-St-Zip: LYNN HAVEN, FL 32444

Title: VPC () Delete
Name: ROSIER JR, DAVID DR.
Address: 1303 WISCONSIN AVE
City-St-Zip: LYNN HAVEN, FL 32444

Title: D () Delete
Name: CRITTEN, LINDSAY L
Address: 1305 KRISTANNA DRIVE
City-St-Zip: PANAMA CITY, FL 32405

Title: D () Delete
Name: PENDER, KIM
Address: 604 S GAY
City-St-Zip: PANAMA CITY, FL 32404

Title: S () Delete
Name: SCOTT, LUTHER E JR
Address: 3005 FAIRMONT DR
City-St-Zip: PANAMA CITY, FL 32403

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: S (X) Change () Addition
Name: SCOTT, LUTHER E JR
Address: 319 EAST 11TH
City-St-Zip: PANAMA CITY, FL 32401

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: LINDSAY L. CRITTEN

D

05/05/2008

Electronic Signature of Signing Officer or Director

Date