

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000097938

FILED
Feb 19, 2009
Secretary of State

Entity Name: PATHWAYS HOME MARKETING, INC.

Current Principal Place of Business:

315 WAINAI DRIVE
MERRITT ISLAND, FL 32953

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 541421
MERRITT ISLAND, FL 32954

New Mailing Address:

FEI Number: 26-3686887

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GEORGES, MARY
315 WAINAI DRIVE
MERRITT ISLAND, FL 32953 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PRES () Delete
Name: GEORGES, MARY
Address: 315 WAINAI DR.
City-St-Zip: MERRITT ISLAND, FL 32953

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: GEORGES, MARY
Address: 315 WAINAI DR.
City-St-Zip: MERRITT ISLAND, FL 32953 US

Title: CFO () Change (X) Addition
Name: GEORGES, CHARLES
Address: 315 WAINAI DRIVE
City-St-Zip: MERRITT ISLAND, FL 32953 US

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MARY GEORGES

PRES

02/19/2009

_____ Electronic Signature of Signing Officer or Director

_____ Date