

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000000482

**FILED**  
**Feb 27, 2012**  
**Secretary of State**

**Entity Name:** PATHWAYS LIFE COACHING & SUPPORT SERVICES, INC.

**Current Principal Place of Business:**

3990 MINTON RD  
WEST MELBOUNE, FL 32904

**New Principal Place of Business:**

**Current Mailing Address:**

3990 MINTON RD  
WEST MELBOUNE, FL 32904

**New Mailing Address:**

**FEI Number:** 27-1609235

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MANSION, CLEMENTS L III  
3990 MINTON RD  
WEST MELBOUNE, FL 32904 US

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

MANSION, CLEMENT L III  
3990 MINTON RD  
WEST MELBOUNE, FL 32904 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: CLEMENT MANSION

02/27/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D  
Name: MANSION, CLEMENT L III  
Address: 3990 MINTON RD  
City-St-Zip: WEST MELBOUNE, FL 32904

Title: D  
Name: GUERAO, SONIA  
Address: 3990 MINTON RD  
City-St-Zip: WEST MELBOUNE, FL 32904

I hereby 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 all other like empowered.

SIGNATURE: CLEMENT MANSION

D

02/27/2012

Electronic Signature of Signing Officer or Director

Date