

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N17000006269

**Entity Name:** PATHFINDERS MINISTRIES, INC.

**Current Principal Place of Business:**

13224 EVENING SUNSET LANE  
RIVERVIEW, FL 33579

**Current Mailing Address:**

PO BOX 2548  
RIVERVIEW, FL 33568 US

**FEI Number: 82-1396972**

**Certificate of Status Desired: Yes**

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

PEARSON, RHONDA R  
13224 EVENING SUNSET LANE  
RIVERVIEW, FL 33579 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: RHONDA R PEARSON**

**03/10/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            PEARSON, JOHNNIE L  
Address        13224 EVENING SUNSET LANE  
City-State-Zip: RIVERVIEW FL 33579

Title            TREASURER  
Name            PEARSON, RHONDA R  
Address        13224 EVENING SUNSET LANE  
City-State-Zip: RIVERVIEW FL 33579

Title            SECRETARY  
Name            PEARSON, STACEY Q  
Address        13224 EVENING SUNSET LANE  
City-State-Zip: RIVERVIEW FL 33579

Title            DIRECTOR  
Name            BERRY, DWAYNE  
Address        3391 DEER DRIVE  
City-State-Zip: MELBOURNE FL 32940

Title            DIRECTOR  
Name            ORTEGA, CASSANDRA  
Address        6441CANOPY TREE DRIVE  
City-State-Zip: TAMPA FL 33610

Title            DIRECTOR  
Name            JEFFERSON, JAMES  
Address        4821 E. BUSCH BLVD.  
City-State-Zip: TAMPA FL 33617

Title            DIRECTOR  
Name            JEFFERSON, CASSANDRA  
Address        4821 E. BUSCH BLVD.  
City-State-Zip: TAMPA FL 33617

Title            DIRECTOR  
Name            ROBERTSON, JAMAAL  
Address        12285 BLACK WALNUT CT.  
City-State-Zip: JACKSONVILLE FL 32226

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

**SIGNATURE: RHONDA R PEARSON**

**TREASURY**

**03/10/2024**

Electronic Signature of Signing Officer/Director Detail

Date