

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000003195

Entity Name: PATHFINDER OUTDOOR EDUCATION, INC.**Current Principal Place of Business:**1310 22ND AVENUE SOUTH
ST. PETERSBURG, FL 33705**Current Mailing Address:**1310 22ND AVENUE SOUTH
ST. PETERSBURG, FL 33705 US**FEI Number:** 59-3252028**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**DURAND, AMY
1310 22ND AVENUE SOUTH
ST. PETERSBURG, FL 33705 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:** AMY C. DURAND

04/10/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title EXECUTIVE DIRECTOR, CEO
Name DURAND, AMY
Address 1310 22ND AVENUE SOUTH
City-State-Zip: ST. PETERSBURG FL 33705

Title DIRECTOR
Name DELLA ROCCA, VINCENT
Address 3707 W. AZEELE STREET
City-State-Zip: TAMPA FL 33609

Title DIRECTOR
Name MCWADE, JAMIE
Address 770 12TH AVENUE N.
City-State-Zip: ST. PETERSBURG FL 33701

Title DIRECTOR
Name WHALEN, JOE
Address 517 DELMAR TERRACE S.
City-State-Zip: ST. PETERSBURG FL 33701

Title DIRECTOR
Name KAPES, CORY
Address 2324 7TH ST. N
City-State-Zip: ST. PETERSBURG FL 33701

Title DIRECTOR
Name JOYAL, DAN
Address 641 GRAY STREET S
City-State-Zip: ST. PETERSBURG FL 33707

Title DIRECTOR
Name STEELE, MIKE
Address 2364 OAKDALE ST. S.
City-State-Zip: ST. PETERSBURG FL 33705

Title DIRECTOR
Name JOYAL, ANDREA
Address 12933 91ST AVE. N.
City-State-Zip: SEMINOLE FL 33776

Continues on page 2

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: AMY DURAND

EXECUTIVE DIRECTOR

04/10/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	TRIMARCO, LUCY
Address	809 18TH AVE. N
City-State-Zip:	ST. PETERSBURG FL 33704