

**2016 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F01000003116

**FILED**  
**Jan 21, 2016**  
**Secretary of State**  
**CC9713445965**

**Entity Name:** PASTORAL SUPPORT SERVICES INC.

**Current Principal Place of Business:**

30 MANSELL COURT  
SUITE 103  
ROSWELL, GA 30076

**Current Mailing Address:**

30 MANSELL COURT  
SUITE 103  
ROSWELL, GA 30076 US

**FEI Number:** 13-4085918

**Certificate of Status Desired:** No

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

CORPDIRECT AGENTS, INC  
1200 SOUTH PINE ISLAND ROAD  
MIAMI, FL 33324 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

**Officer/Director Detail :**

Title PD  
Name REIFF, MICHELLE  
Address 751 WEST DRAHNER ROAD  
City-State-Zip: OXFORD MI 48371

Title DIRECTOR  
Name NOHRDEN, NANCY  
Address 951 PEACHTREE PARKWAY  
City-State-Zip: CUMMING GA 30041

Title STD  
Name OTERO, LINO  
Address 8815 FULHAM COURT  
City-State-Zip: CUMMING GA 30041

Title VP, DIRECTOR  
Name SMITH, MARY  
Address 9320 MERCY HOLLOW LN.  
City-State-Zip: POTOMAC MD 20854

*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:** LINO OTERO

**SECRETARY**

**01/21/2016**

Electronic Signature of Signing Officer/Director Detail

Date