

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 06, 2006 8:00 am**  
**Secretary of State**

03-06-2006 90002 037 \*\*\*\*61.25

**DOCUMENT # N93000004220**

1. Entity Name  
**FIRST STEP, INC. OF THE FIFTH JUDICIAL CIRCUIT**



Principal Place of Business  
**24 NE 1ST STREET  
ATTN: WENDY PRATT  
OCALA, FL 34470-6660 US**

Mailing Address  
**24 NE 1ST STREET  
ATTN: WENDY PRATT  
OCALA, FL 34470-6660 US**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01102006 Chg-NP CR2E037 (11/05)

4. FEI Number  
**59-3204052**

Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RICH, MARY S  
1802 NW 24TH COURT  
OCALA, FL 34475**

Name  
Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00 May Be  
Added to Fees**

**Make check payable to  
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☐ Delete  
NAME **RICH, MARY S**  
STREET ADDRESS **1802 NW 24TH COURT**  
CITY-ST-ZIP **OCALA, FL 34475**

TITLE **DELETED** ☐ Change ☒ Addition  
NAME **SCHWARZ, TAREN**  
STREET ADDRESS **1326 W North Boulevard, Suite 5**  
CITY-ST-ZIP **Leesburg, FL 34748**

TITLE **V** ☒ Delete  
NAME **KOLODY, DEBBIE**  
STREET ADDRESS **734 NORTH THIRD STREET SUITE 512**  
CITY-ST-ZIP **LEESBURG, FL 347484457**

TITLE **V** ☒ Change ☐ Addition  
NAME **POPE, ELMA**  
STREET ADDRESS **1330 SE 80th Street**  
CITY-ST-ZIP **Ocala, FL 34480**

TITLE **S** ☐ Delete  
NAME **PRATT, WENDY K**  
STREET ADDRESS **24 NE 1ST STREET**  
CITY-ST-ZIP **OCALA, FL**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☐ Delete  
NAME **DIETZ, FRED**  
STREET ADDRESS **109 SOUTH FLORIDA STREET**  
CITY-ST-ZIP **BUSHNELL, FL 33513**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE **D** ☐ Delete  
NAME **BEVILLE, STEVE**  
STREET ADDRESS **204 NW 3RD AVE**  
CITY-ST-ZIP **OCALA, FL 34475**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Wendy K. Pratt* Wendy K. Pratt

1-25-06

352-732-1215