

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State

04-04-2003 90145 020 ****61.25

DOCUMENT # 708810

1. Entity Name

TWELVE STEP HOUSE, INC.



Principal Place of Business

**205 SW 23RD ST.
FT LAUDERDALE FL 33315**

Mailing Address

**205 SW 23RD ST.
FT LAUDERDALE FL 33315**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-1055021**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

☐ CHECK HERE IF MAKING CHANGES

6. Name and Address of Current Registered Agent

**MANDEL, GARY
5722 S FALMINGO RD #287
COOPER CITY FL 33330**

7. Name and Address of New Registered Agent

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

FILE NOW: FEE IS \$61.25

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

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
TP	BLAKEMAN, JUDY	111 NITTARWAY	DAVE FL 33324	<input type="checkbox"/>
TP	DANIELS, K	2965 S. WILLS AVE.	FT. LAUDERDALE FL 33345	<input checked="" type="checkbox"/>
TD	SAMPSON-SMITH, DIANE	2300 GRIFFIN ROAD #110	FT. LAUDERDALE FL 33312	<input checked="" type="checkbox"/>
TS	WARD, DICK	1151 S.W. 32 STREET	FT. LAUDERDALE FL 33315	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TREASURER	Richard Stone	1415 SW 1st St #2	FT LAUD, FL 33312	<input checked="" type="checkbox"/>
PRESIDENT	John Platt	26 SE 9th Ave	FT LAUD, FL 33316	<input checked="" type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 611, 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Richard Stone 4/22/03 954-444-6279

Date

Daytime Phone #

CR2E037 (10/02)