2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 731978

Entity Name: FIRST STEP, INC. OF POLK COUNTY

FILED Sep 04, 2009 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

3939 HWY 98 SOUTH, #105 3939 HIGHWAY 98 SOUTH

LAKELAND, FL 33812 STE 105

LAKELAND, FL 33812

Current Mailing Address: New Mailing Address:

3939 HWY 98 SOUTH, #105 3939 HIGHWAY 98 SOUTH

LAKELAND, FL 33812 STE 105

LAKELAND, FL 33812

FEI Number: 59-1628244 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

CRISS, STEVE LATTIG, ROBERT 3939 HWY 98 SOUTH, #105 3939 HWY 98 SOUTH, #105 LAKELAND, FL 33812 LAKELAND, FL 33812

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: ROBERT LATTIG 09/04/2009

> Electronic Signature of Registered Agent Date

> > City-St-Zip:

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

CRISS, STEVE LATTIG, ROBERT Name: Name: Address: 3939 HWY 98 SOUTH, #105 Address: 3939 HWY 98 SOUTH, #105 City-St-Zip: LAKELAND, FL 33812 LAKELAND, FL 33812

Title: Title: (X) Change () Addition () Delete Name: CRUMP, LORI Name: CRISS, STEVE

Address: 3939 HWY 98 SOUTH, #105 Address: 3939 HWY 98 SOUTH, #105

City-St-Zip: LAKELAND, FL 33812 City-St-Zip: LAKELAND, FL 33812

Title: () Delete Title: (X) Change () Addition

HUMMEL, ERICH Name: CHAVES, ALLISON Name: 10800 EVANS RD 3939 HWY 98 SOUTH, #105 Address: Address: City-St-Zip: POLK CITY, FL 338686925 City-St-Zip: LAKELAND, FL 33812

Title: () Delete Title: () Change () Addition

Name: LATTIG, BOB Name: 3939 HWY 98 SOUTH, #105 Address: Address: City-St-Zip: LAKELAND, FL 33812 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: ROBERT LATTIG Ρ 09/04/2009