2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 07, 2002 8:00 am
Secretary of State
07-07-2002 90066 006 ****55.00

DOCUMENT # L00000009597

1. Entity Name
FIRST STEP FOR KIDS, LLC

Principal Place of Business	Mailing Address
3120 WEST 23RD STREET PANAMA CITY FL 32405	3120 WEST 23RD STREET PANAMA CITY FL 32405

2. Principal Place of Business	3. Mailing Address
1811 Beck Avenue	1811 Beck Avenue
Suite, Apt. #, etc.	Suite, Apt. #, etc.
Panama City, Fl. 32405	Panama City, Fl.
City & State	City & State
32405 Bay	
Zip: 32405 / Country: Bay	Zip: / Country:

[redacted]

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3659669 — Applied For / Not Applicable

5. Certificate of Status Desired ☑ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GIVENS, SANDY 3120 WEST 23RD STREET PANAMA CITY FL 32405	Name: Sandra Givins Street Address (P.O. Box Number is Not Acceptable): 704 8TH Street Circle City: Lynn Haven FL Zip Code: 32444

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.

SIGNATURE Sandra J. Givins MGRM Sandra J Givins 6/5/02
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $50.00
Make Check Payable to Department of State
Due By May 1, 2002

9. MANAGING MEMBERS/MANAGERS		10. ADDITIONS/CHANGES	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GIVENS, WILLIAM 704 8TH ST. CIRCLE LYNN HAVEN FL 32444 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pres. Givins, William 704 8TH St. Circle Lynn Haven, Fl. 32444 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST ANGLIN, TRACY 704 8TH ST. CIRCLE LYNN HAVEN FL 32444 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM GIVENS, SANDY 3120 W. 23RD ST. PANAMA CITY FL 32405 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGRM Sandra Givins 704 8TH St. Circle ~~Lynn Haven, Fl 32444~~ ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V. Pres Anglin, Kevin 105 W. 11TH Street Lynn Haven, Fl. 32444 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

CR2E083 (9/01)

11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: SIGNATURE REQUIRED 6/5/02 (850) 914-2222
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #