

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

1811 Beck Avenue

3. Mailing Address

1811 Beck Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Panama City, FL 32405

Panama City, FL

City & State

City & State

Zip

Country

32405

Bay

Zip

Country

Bay

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

Lynn Haven

City

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 reinstalling)

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 V
 NAME GIVENS, WILLIAM
 STREET ADDRESS 704 8TH ST. CIRCLE
 CITY-ST-ZIP LYNN HAVEN FL 32444 ☐ Delete

TITLE Pres. Givins, William
 NAME
 STREET ADDRESS 704 8TH St. Circle
 CITY-ST-ZIP Lynn Haven, FL 32444 ☒ Change ☐ Addition

TITLE ST
 NAME ANGLIN, TRACY
 STREET ADDRESS 704 8TH ST. CIRCLE
 CITY-ST-ZIP LYNN HAVEN FL 32444 ☐ Delete

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

TITLE MGRM
 NAME GIVENS, SANDY
 STREET ADDRESS 3120 W. 23RD ST.
 CITY-ST-ZIP PANAMA CITY FL 32405 ☐ Delete

TITLE MGRM
 NAME Sandra Givins
 STREET ADDRESS 704 8TH ST. Circle
 CITY-ST-ZIP Lynn Haven, FL 32444 ☒ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE V.Pres
 NAME Anglin, Kevin
 STREET ADDRESS 105 W. 11TH Street
 CITY-ST-ZIP 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

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:

Sandra J. Givins

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE

6/5/02 (850) 914-2222

Date

Daytime Phone #

CR2E083 (8/01)