

# 2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000021780

Entity Name: INSTEP, LLC

FILED  
Feb 04, 2006  
Secretary of State

## Current Principal Place of Business:

400 NORTH TAMPA STREET, SUITE 2300  
TAMPA, FL 33602

## New Principal Place of Business:

## Current Mailing Address:

POST OFFICE BOX 38070  
TALLAHASSEE, FL 32315

## New Mailing Address:

FEI Number: 20-1412739

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MCCAIN, CARTER B  
201 NORTH TAMPA STREET, SUITE 2000  
TAMPA, FL 33602 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

## MANAGING MEMBERS/MANAGERS:

Title: MGR ( ) Delete  
Name: MCCAIN, CARTER B  
Address: 400 NORTH TAMPA STREET, SUITE 2300  
City-St-Zip: TAMPA, FL 33602

Title: MGR ( ) Delete  
Name: STEPHENS, ROBERT  
Address: 14409 W NEBRASKA AVE  
City-St-Zip: TAMPA, FL 33613

Title: MGR ( ) Delete  
Name: JONES, GENE  
Address: 2012 DUNEAGLE LANE  
City-St-Zip: TALLAHASSEE, FL 32317

Title: MGR ( ) Delete  
Name: KERN, CHARLES  
Address: 3540 NW 71ST STREET  
City-St-Zip: COCONUT CREEK, FL 33073

## ADDITIONS/CHANGES:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic 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: EUGENE JONES

MGR

02/04/2006

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date