

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N00000005065

FILED
Apr 08, 2002 8:00 AM
Secretary of State

Entity Name: NEXT STEP SCHOLARSHIP FOUNDATION, INC.

Current Principal Place of Business:

2415 COSTA VERDE BLVD. #209
JACKSONVILLE BEACH, FL 32250

New Principal Place of Business:

Current Mailing Address:

2415 COSTA VERDE BLVD. #209
JACKSONVILLE BEACH, FL 32250

New Mailing Address:

FEI Number: 59-3663131

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WOTIZ, ARTHUR C
2415 COSTA VERDE BLVD. #209
JACKSONVILLE BEACH, FL 32250

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WOTIZ, ARTHUR C
Address: 2415 COSTA VERDE BLVD. #209
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D () Delete
Name: MICKLER, ROBERT O
Address: 2415 COSTA VERDE BLVD. #209
City-St-Zip: JACKSONVILLE BEACH, FL 32250

Title: D () Delete
Name: KLOEPPEL, DEBRA
Address: 2415 COSTA VERDE BLVD. #209
City-St-Zip: JACKSONVILLE BEACH, FL 32250

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: KLOEPPEL-WOTIZ, DEBRA
Address: 2415 COSTA VERDE BLVD. #209
City-St-Zip: JACKSONVILLE BEACH, FL 32250

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ARTHUR C. WOTIZ

PRES

04/08/2002

Electronic Signature of Signing Officer or Director

Date