

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008009

Entity Name: S.T.E.P. MINISTRIES, INC.

FILED
Apr 27, 2005
Secretary of State

Current Principal Place of Business:

6751 POT-O-GOLD LANE
ORLANDO, FL 32809

New Principal Place of Business:

Current Mailing Address:

6751 POT-O-GOLD LANE
ORLANDO, FL 32809

New Mailing Address:

FEI Number: 59-3681060

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CHRISTOPHER, VIRGINIA L
6751 POT-O-GOLD LANE
ORLANDO, FL 32809 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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CHRISTOPHER, VIRGINIA L
Address: 6754 POT-O-GOLD LANE
City-St-Zip: ORLANDO, FL 32809

Title: D () Delete
Name: HOUBA, CATHERINE
Address: 4137 LAKE MIRA DR
City-St-Zip: ORLANDO, FL 32817

Title: D () Delete
Name: WILSON, NANCY
Address: 5901 AUGUSTA NATIONAL DR #208
City-St-Zip: ORLANDO, FL 32822

Title: D () Delete
Name: MARGARET, ANTHONY
Address: 4906 BELLEVILLE AVENUE
City-St-Zip: ORLANDO, FL 32812

Title: D () Delete
Name: VESCOVI, JANET S
Address: 2742 RAINBOW SPRINGS LANE
City-St-Zip: ORLANDO, FL 32828

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: D (X) Change () Addition
Name: ANTHONY, MARGARET
Address: 4906 BELLEVILLE AVENUE
City-St-Zip: ORLANDO, FL 32812

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 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: VIRGINIA L. CHRISTOPHER

PRES

04/27/2005

Electronic Signature of Signing Officer or Director

Date