

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000425

FILED
Mar 15, 2005
Secretary of State

Entity Name: THE STEPS FOUNDATION, INC.

Current Principal Place of Business:

2805 VERONIA DRIVE
APT. 204
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

2805 VERONIA DRIVE
APT. 204
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 01-0752216

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HENRY, CHRISTOPHER J
2805 VERONIA DRIVE
APT 204
PALM BEACH GARDENS, FL 33410 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: C () Delete
Name: HENRY, CHRISTOPHER J
Address: 2805 VERONIA DRIVE APT 204
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: D () Delete
Name: KWACZ, PATRICIA A
Address: 3223 VIRGINIA STREET
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: LANDELL, ANN
Address: 350 W LORAIN ST
City-St-Zip: GLENDALE, CA 91202

Title: D () Delete
Name: HENRY, CHRISTOPHER J
Address: 2805 VERONIA DR APT 204
City-St-Zip: PALM BEACH GARDENS, FL 33410

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: () 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: CHRISTOPHER J HENRY

C

03/15/2005

Electronic Signature of Signing Officer or Director

Date