

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 24, 2008  
Secretary of State**

DOCUMENT# N07000002742

Entity Name: FIRSTSTEP REFUGE, INC

**Current Principal Place of Business:**

3524 WELLS STREET  
ORLANDO, FL 32805

**New Principal Place of Business:**

**Current Mailing Address:**

3524 WELLS STREET  
ORLANDO, FL 32805

**New Mailing Address:**

FEI Number: 20-8724606      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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: PDT ( ) Delete  
Name: TODD, ANGELA  
Address: 3524 WELLS STREET  
City-St-Zip: ORLANDO, FL 32805

Title: VD ( ) Delete  
Name: HENDERSON, SHAMPREA  
Address: 3524 WELLS STREET  
City-St-Zip: ORLANDO, FL 32805

Title: DS ( ) Delete  
Name: JONES, PHILIP  
Address: 3524 WELLS STREET  
City-St-Zip: ORLANDO, FL 32805

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PED (X) Change ( ) Addition  
Name: MCNAIR, DJUANA  
Address: 3524 WELLS STREET  
City-St-Zip: ORLANDO, FL 32805

Title: VD (X) Change ( ) Addition  
Name: JOHNSON, CURTIS  
Address: 3524 WELLS STREET  
City-St-Zip: ORLANDO, FL 32805

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

Title: TD ( ) Change (X) Addition  
Name: TODD, ANGELA  
Address: 3524 WELLS STREET  
City-St-Zip: ORLANDO, FL 32805

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: DJUANA MCNAIR

PED

03/24/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date