

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000007139

FILED
Jan 27, 2011
Secretary of State

Entity Name: ORDER MY STEPS CORP.

Current Principal Place of Business:

2224 NW 8ST.
SUITE #001
FORT LAUDERDALE, FL 33311 US

Current Mailing Address:

1312 NW 12 STREET
FORT LAUDERDALE, FL 33311 US

New Principal Place of Business:

2224 NW 8ST.
SUITE001
FORT LAUDERDALE, FL 33311 US

New Mailing Address:

401 E. LASOLAS BLVD.
SUITE 130-514
FORT LAUDERDALE, FL 33301 US

FEI Number: 26-0562244

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COPELAND, SHALONDA L
2224 NW 8ST.
SUITE #001
FORT LAUDERDALE, FL 33311 US

Name and Address of New Registered Agent:

COPELAND, SHALONDA L
401 E. LASOLAS BLVD.
SUITE 130-514
FORT LAUDERDALE, FL 33301 US

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: SHALONDA L. COPELAND

01/27/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: CEO
Name: COPELAND, SHALONDA L
Address: 2224 NW 8ST.
City-St-Zip: FORT LAUDERDALE, FL 33311 US

Title: VP
Name: MILLS, ANTHONY TYRON
Address: 2224 NW 8TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33311 US

Title: DIR
Name: MARGIE FRANCIS, MS,ARNP,BC
Address: 6740 N.W.45 COURT
City-St-Zip: LAUDERHILL, FL 33319

Title: DIR
Name: DEVON R. HARRINGTON, LCSW
Address: 269 N.W. 7TH AVENUE UNIT 118
City-St-Zip: MIAMI, FL 33136

Title: DIR
Name: ARDRENIA COLLINS SMITH
Address: 1209 S. W. MEDINA AVENUE
City-St-Zip: PORT ST.LUCIE, FL 34953

Title: DIR
Name: CLIFFORD WALKER
Address: 632 S.W. 8TH AVENUE
City-St-Zip: FORT LAUDERDALE, FL 33315

I hereby 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 all other like empowered.

SIGNATURE: SHALONDA L. COPELAND

CEO

01/27/2011

Electronic Signature of Signing Officer or Director

Date