

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000008057

FILED  
Apr 23, 2009  
Secretary of State

Entity Name: STEP TO SUCCESS, INC.

## Current Principal Place of Business:

919 WEST MASSACHUSETTS STREET  
HERNANDO, FL 34442 US

## New Principal Place of Business:

## Current Mailing Address:

919 WEST MASSACHUSETTS STREET  
HERNANDO, FL 34442 US

## New Mailing Address:

919 WEST MASSACHUSETTS STREET  
HERNANDO, F 34442 US

FEI Number: 45-0569681

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

JEFFES, JENNIFER D  
919 WEST MASSACHUSETTS STREET  
HERNANDO, FL 34442 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: VST ( ) Delete  
Name: JEFFES, JENNIFER D  
Address: 919 WEST MASSACHUSETTS ST.  
City-St-Zip: HERNANDO, FL 34442 US

Title: P ( ) Delete  
Name: CORCORAN, ANNE W  
Address: 9676 DEER VALLEY DRIVE  
City-St-Zip: TALLAHASSEE, FL 32312 US

Title: M ( ) Delete  
Name: JOHNSON, JON E  
Address: PO BOX 10805  
City-St-Zip: TALLAHASSEE, FL 323022805 US

Title: M ( ) Delete  
Name: TRAVIESA, TREY  
Address: 410 S. WARE BLVD. SUITE 105  
City-St-Zip: TAMPA, FL 33619 US

Title: M ( ) Delete  
Name: JEFFES, RYAN S  
Address: 919 WEST MASSACHUSETTS ST  
City-St-Zip: HERNANDO, FL 34442 US

Title: M ( ) Delete  
Name: CORCORAN, RICHARD  
Address: 9676 DEER VALLEY DRIVE  
City-St-Zip: TALLAHASSEE, FL 32312 US

## 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:

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 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: JENNIFER JEFFES

VST

04/23/2009

Electronic Signature of Signing Officer or Director

Date