NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

DIVISION OF CORPORATIONS

## N96000001218 **DOCUMENT #**

1. Corporation Name

FORWARD STEPS, INC.

Principal Place of Business

3820 ZION RD

JACKSONVILLE FL 32207

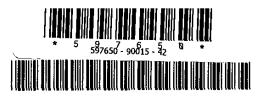
Mailing Address

3820 ZION RD

JACKSONVILLE FL 32207

## **FILED** Jul 28, 1999 8:00 am Secretary of State

07-28-1999 90015 042 \*\*\*\*70.00



2. Principal Pl	ace of Business	2a. Mailing Address	SA 7	3. Date Incorporated or Qualifed 03/04/1996	
	room Steps INC	26 Forward	Steps-tu	4. FEI Number	Anniled For
Suite, Apt. 705	#, etc. ガノフダクミナ	Suite, Apt. #, etc.	d 6+	59-3381636	Applied For Not Applicable
	<i>u.</i>	27 105 10c 2 =	· ~ /		\$8.75 Additional
City & State	sonville Beach	28 Jack sonvi	le Beach	5. Certificate of Status Desired	Fee Required
Zip	Country	Zip	Quintry	6. Election Campaign Financing	\$5.00 May Be
24 322			30 Ouva	Trust Fund Contribution	Added to Fees
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
Name Robert A. Luther					
LUTHER, ROBERT  82 Street Address (P.O. Box Number is Not Acceptable)  3820 ZION RD					ſ
0020 21011 110					
JACKSONVILLE FL 32207					
· · ·	•		84 City	cksonville	FL 32207
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered					
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE	Robert A. Luther	-(CEO.)	Kobert a	Kuther 7-	-26-99
	Signature, typed or printed name of registered agent	and the if applicable. (NOTE:	Registered Agent signature rec	desired when reinstating)	AIC.
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	Change PLAddition
TITLE	D	☐ DELETE	1.f TTLE	VP	☐ Change [22-dulubit
NAME	LUTHER, ROBERT A		1.2 NAME	Sherrie Hamilton	
STREET ADDRESS	255 S FLETCHER			2007 Eastern Dr	20050
CITY-ST-ZIP	FERNANDINA BEACH FL 32034			Jacksonville Beach, Fl.	32250
TITLE	T	☐ DELETE	2.1 TITLE	$T$ , $\lambda$ ,	Change PAddition
NAME	Bahari, al		2.2 NAME	Terri Post	ļ
STREET ADDRESS	539 W 61ST ST		2.3 STREET ADORESS	1713-8 EL Carino	
CITY-ST-ZIP	JACKSONVILLE FL		2.4 CITY-ST-ZIP	Sacksonville F1 3 Secaram Director	22/6
ΠLE	T	DELETE			Change Addition
NAME	ROSELLE, BERT		3.2 NAME	Carmella-Prescott.	إلى مالىلى لىلامى
STREET ADDRESS	451 KATHRINE ST			220 SNOW goose HN	
CITY-ST-ZIP	JACKSONVILLE FL		3.4. CITY-ST-ZIP		32225
TITLE	Ť	DELETE	4.1 TITLE	て、	Change Addition
NAME	GRIN, STAN		4. 2 NAME	Pat Brown 1 0 1	- 100
STREET ADDRESS	134 E CHURCH ST		4.3 STREET ADDRESS	33 Swiming Pen Creek	
CITY-ST-ZIP	JACKSONVILLE FL		4.4 CITY-ST-ZIP	Middlebrus, Fl. 320	768
TITLE	TD	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	WHITAKER, JOE		5.2 NAME	ı	}
STREET ADDRESS	10735 ALDEN RD #3		5.3 STREET ADDRESS		
CITY-ST-ZIP	JACKSONVILLE FL		5.4 CITY-ST-ZIP		
TITLE	PD	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME ]	CAPP, JIMMY		6.2 NAME		
STREET ADDRESS	930 N 1ST ST		6.3 STREET ADDRESS	•	
CITY-ST-ZIP	JACKSONVILLE BCH FL		6.4 CITY-ST-ZIP		
		this filing done not qualify for	the customers add	in Section 119 07(3)(i) Florida Statutes, I furth	per certify that the information

Indicated on this annual report or supplied with this limit does not quality for the exemption stated in Section 13.07(5)(f), it what a state is indicated in this annual report or suppliemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.