2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004130

Entity Name: NEXT STEP INTERNATIONAL.ORG, INC.

FILED Jul 30, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 2245 CRICKET RIDGE DRIVE CANTONMENT, FL 32533 **Current Mailing Address: New Mailing Address:** 2172 W. NINE MILE ROAD #197 PENSACOLA, FL 32534 FEI Number: 59-3521189 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LANCASTER, GREG Z 2245 CRICKÉT RIDGE DRIVE CANTONMENT, FL 32533 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete LANCASTER, DONNA Name: Name: 2245 CRICKET RIDGE DR Address: Address: City-St-Zip: CANTONMENT, FL 32533 City-St-Zip: Title: () Delete Title: (X) Change () Addition HAMILTON, PATRICK Name: HAMILTON, PATRICK Name: Address: 2346 WINDSTONE DR Address: 9311 PINE FOREST ROAD PMB19 City-St-Zip: PENSACOLA, FL 32526 City-St-Zip: PENSACOLA, FL 32534 Title: () Delete Title: () Change () Addition LANCASTER, GREG Name: Name: 2245 CIRCKET RIDGE DR Address: Address: City-St-Zip: CANTONMENT, FL 32533 City-St-Zip: Title: () Delete Title: () Change (X) Addition Name: Name: RAMOS, JOHN 6304 WEST SHORE DRIVE Address: Address: City-St-Zip: City-St-Zip: PENSACOLA, FL 32506 Title: () Delete Title: () Change (X) Addition COLLINS, MICHAEL Name: Name: 5908 SAUFLEY PINES COURT Address: Address: City-St-Zip: City-St-Zip: PENSACOLA, FL 32526 Title: () Delete Title: () Change (X) Addition LIPSCOMB. BUFORD Name: Name: Address: Address: 16461 INNERARITY POINT ROAD PENSACOLA, FL 32507 City-St-Zip: 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: DONNA LANCASTER D 07/30/2004