## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000004130

Entity Name: NEXT STEP INTERNATIONAL.ORG, INC.

FILED Apr 30, 2005 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
2245 CRICKET RIDGE DRIVE CANTONMENT, FL 32533				2172 W. NINE MILE RD. #197 PENSACOLA, FL 32534			
Current Mailing Address:				New Mailing Address:			
#197	NE MILE ROA LA, FL 32534	D					
FEI Number:	59-3521189	FEI Number Applied For ( )	FEI Nun	nber Not Appl	icable ( )	Certificate of Status Desired ( )	
Name and	Address of C	urrent Registered Agent:		Name and	Address of N	lew Registered Agent:	
2245 CRICI	ER, GREG Z KET RIDGE D ENT, FL 3253						
The above in the State		ubmits this statement for the pu	rpose o	f changing it	ts registered o	ffice or registered agent, or both,	
SIGNATUR	RE:						
	Electron	c Signature of Registered Agen	ıt			Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:				
Title: Name: Address: City-St-Zip:	D () LANCASTER, D 2245 CRICKET CANTONMENT,	RIDGE DR		Title: Name: Address: City-St-Zip:	( )	) Change()Addition	
Title: Name: Address: City-St-Zip:	HAMILTON, PAT	EST ROAD PMB19		Title: Name: Address: City-St-Zip:	( )	) Change ()Addition	
Title: Name: Address: City-St-Zip:	PD () LANCASTER, G 2245 CIRCKET CANTONMENT,	RIDGE DR		Title: Name: Address: City-St-Zip:	( )	) Change ()Addition	
Title: Name: Address: City-St-Zip:	D () RAMOS, JOHN 6304 WEST SH PENSACOLA, F			Title: Name: Address: City-St-Zip:	( )	) Change()Addition	
Title: Name: Address: City-St-Zip:	D () COLLINS, MICH 5908 SAUFLEY PENSACOLA, F	PINES COURT		Title: Name: Address: City-St-Zip:	HAMILTON, CH	D DR. APT.P1-103	
Title: Name:	LIPSCOMB, BUI	Delete FORD		Title: Name:		) Change ()Addition	

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.

City-St-Zip:

SIGNATURE: GREG LANCASTER PD 04/30/2005

City-St-Zip: PENSACOLA, FL 32507