


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2007 08:00 A
Secretary of State

DOCUMENT # N98000005310 1. Entity Name STEP BY STEP CHRISTIAN DAY SCHOOL, INC.	
--	---

Principal Place of Business 7800 COLLEGE PKWY FORT MYERS, FL 33907-5552 US	Mailing Address 7800 COLLEGE PKWY FORT MYERS, FL 33907-5552 US
--	--

DO NOT WRITE IN THIS SPACE



04302007 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0866446	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent LUCAS, JULIE A. 7800 COLLEGE PKWY FORT MYERS, FL 33907-5552

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u><i>Julie Lucas</i></u> 4/27/07 <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>
--

Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000760643 05/25/07-80022-010 61.25
---	--	---

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUCAS, JULIE 1813 SE 8TH STREET CAPE CORAL, FL 33990
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P REED, MICHAEL 1429 CAPE CORAL PARKWAY # 11 CAPE CORAL, FL 33914
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR GWALTREY, SHELTON 1552 MANCHESTER BLVD. FORT MYERS, FL 33919
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR GWALTNEY, MICHELLE 1552 MANCHESTER BLVD. FORT MYERS, FL 33919
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR MASSENGALE, ROBERT 7811 REFLECTION COVE DRIVE # 107 FORT MYERS, FL 33907
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TR HAGOPIAN, VALERIE 12201 SHOREVIEW DRIVE MATIACHA, FL 33993

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: <u><i>Julie Lucas</i></u> 4/27/07 239-936-9201 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>
