

AMENDED

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000002763

1. Entity Name

STEP BY STEP RESIDENCE INC.

08-29-2001 90013 039 \*\*\*\*76.25

FILED

01 OCT -1 AM 10:33

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Principal Place of Business

~~1310-330 AVE~~  
WEST PALM BEACH FL 33416

Mailing Address

P.O. BOX 18881  
WEST PALM BEACH FL 33407

2. Principal Place of Business

1310-SAPODILLA  
Suite, Apt. #, etc.

3. Mailing Address

P.O. Box - 18881  
Suite, Apt. #, etc.



DO NOT WRITE IN THIS SPACE

City & State

W. P. B., FL.

City & State

W. P. B., FL.

4. FEI Number

65-0661440

Applied For

Not Applicable

Zip

33401

Country

P.B.

Zip

33416

Country

P.B.

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

TURNQUIST, VERNEDA

~~4010 BIRCHWOOD AVE~~

WEST PALM BEACH FL 33416

7321-73rd WAY

WEST PALM Bch, FL.

33407

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.

SIGNATURE

Verneda Z. Turnquist

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

LS

DATE

FILE NOW: FEE IS \$61.25

After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing

Trust Fund Contribution.

\$5.00 May Be

Added to Fees

Make Check Payable to

Department of State

10. OFFICERS AND DIRECTORS

TITLE D  
NAME TURNQUIST, VERNEDA  
STREET ADDRESS 7321 73RD WAY  
CITY-ST-ZIP WEST PALM BEACH FL 33407

TITLE ~~ADD~~  
NAME SCOTT, FELICIA A  
STREET ADDRESS 7321 73RD WAY  
CITY-ST-ZIP WEST PALM BEACH FL 33407

TITLE T  
NAME ROBY, SAUNDRA  
STREET ADDRESS 4011 36TH CT  
CITY-ST-ZIP WEST PALM BEACH FL 33407

TITLE AD  
NAME MASON, WANDA  
STREET ADDRESS ~~233 GORE ST~~  
CITY-ST-ZIP WEST PALM BEACH FL 33407

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D  
NAME MASON, WANDA  
STREET ADDRESS 1310-SAPODILLA AVE  
CITY-ST-ZIP W. P. B., FL. 33401

TITLE D  
NAME TURNQUIST, EWELL  
STREET ADDRESS 1546-40th ST.  
CITY-ST-ZIP W. P. B., FL. 33407

TITLE D  
NAME CHRISTIE, RUTH  
STREET ADDRESS P.O. BOX - 786  
CITY-ST-ZIP JENSEN BEACH, FL.

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

Verneda Z. Turnquist

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/18/01

561-802-3254

Date

Daytime Phone #

CR2E037 (5/01)