

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jun 02, 2008 8:00 am
Secretary of State

06-02-2008 90008 048 ****61.25

DOCUMENT # N99000002763

1. Entity Name

STEP BY STEP RESIDENCE INC.



Principal Place of Business

**1546 40TH ST
WEST PALM BEACH FL 33407
US**

Mailing Address

**1546 40TH STREET
WEST PALM BEACH FL 33407
US**

2. Principal Place of Business - No. P.O. Box #

1010-ADAMS ST.

3. Mailing Address

1546-40th ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

W. P. B. FL.

City & State

W. P. B. FL.

Zip

33407

Country

Zip

33407

Country

FL.

4. FEI Number

65-0661440

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/07)



6. Name and Address of Current Registered Agent

**TURNQUIST, VERNEDA
1546 40TH ST
WEST PALM BEACH FL 33407**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE ☐ Delete
NAME **D. TURNQUIST, VERNEDA**
STREET ADDRESS **1546-46TH ST**
CITY- ST- ZIP **WEST PALM BEACH FL 33407**

TITLE ☐ Delete
NAME **AD MASON, WANDA**
STREET ADDRESS **1310 SAPODILA AVE**
CITY- ST- ZIP **WEST PALM BEACH FL 33401**

TITLE ☐ Delete
NAME **SD TURNQUIST, CHRISTY**
STREET ADDRESS **1564 28TH ST.**
CITY- ST- ZIP **RIVIERA BEACH FL**

TITLE ☐ Delete
NAME **D. TURNQUIST, EWELL**
STREET ADDRESS **1546 40TH STREET**
CITY- ST- ZIP **WEST PALM BEACH FL 33407**

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

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY- ST- ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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CITY- ST- ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY- ST- ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

Verneda Turnquist

4/30/08 (561-845-8387)