

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004459

FILED
Apr 09, 2007
Secretary of State

Entity Name: THE NEXT STEP CENTER, INC.

Current Principal Place of Business:

840/850 NW 10 TERR
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

PO BOX 1126
STUART, FL 349951126

New Mailing Address:

FEI Number: 65-0998330

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COOK, TINA M
8032 SE SEQUOIA DRIVE
HOBE SOUND, FL 33455 US

Name and Address of New Registered Agent:

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:

Title: P (X) Delete
Name: COOK, RONALD P
Address: 8032 SE SEQUOIA DRIVE
City-St-Zip: HOBE SOUND, FL 33455

Title: VP () Delete
Name: COOK, TINA M
Address: 8032 SE SEQUOIA DRIVE
City-St-Zip: HOBE SOUND, FL 33455

Title: S () Delete
Name: WILSON, ROBERT F
Address: 840 NW 10 TERR
City-St-Zip: STUART, FL 34994

Title: T () Delete
Name: NEWNAM, DENNY
Address: 6121 SE LANDING WAY #15
City-St-Zip: STUART, FL 34997

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: P (X) Change () Addition
Name: COOK, TINA M
Address: 8032 SE SEQUOIA DRIVE
City-St-Zip: HOBE SOUND, FL 33455

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: TINA COOK

P

04/09/2007

Electronic Signature of Signing Officer or Director

_____ Date