

# 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

**FILED**  
**Apr 21, 2003 8:00 am**  
**Secretary of State**

04-21-2003 90480 046 \*\*\*\*\*61.25

**DOCUMENT # N99000004459**

1. Entity Name

**THE NEXT STEP CENTER, INC.**



Principal Place of Business

3370 N.E. WEST CT.  
JENSEN BEACH FL 34957

Mailing Address

PO BOX 1113  
JENSEN BCH FL 34958

**11003455**



☒ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business

840/850 NW 10 Ter  
Suite, Apt. #, etc.

3. Mailing Address

P.O. Box 1126  
Suite, Apt. #, etc.

City & State  
STUART, FL

Zip  
34994

Country  
USA

City & State  
STUART, FL

Zip  
34995-1126

Country  
USA

4. FEI Number **65-0998330**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**NORMAN, KENNETH A**  
800 S.E. MONTEREY COMMONS BLVD., STE. 200  
STUART FL 34996

7. Name and Address of New Registered Agent

Name **RONALD P. COOK**

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

**8032 SE SEQUOIA DRIVE**

City **Hobe Sound, FL**

**FL**

Zip Code  
**33455**

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 *Ronald P. Cook Tina Cook VP*

*4/15/03*

**FILE NOW: FEE IS \$61.25**

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 **D** ☒ Delete  
NAME **JESTER, STEVE**  
STREET ADDRESS **3734 NW PIN OAK DR**  
CITY-ST-ZIP **JENSEN BEACH FL 34957**

TITLE **D** ☒ Delete  
NAME **JESTER, RENEE**  
STREET ADDRESS **3734 NW PIN OAK DR**  
CITY-ST-ZIP **JENSEN BEACH FL 34957**

TITLE **P** ☒ Delete  
NAME **WOOD, MILDRED**  
STREET ADDRESS **402 SE OAKRIDGE DR**  
CITY-ST-ZIP **PORT SAINT LUCIE FL 34984**

TITLE **TREASURER** ☒ Delete  
NAME **TURNBLACER, FRED**  
STREET ADDRESS **3937 S.E. FAIRWAY EAST**  
CITY-ST-ZIP **STUART FL 34997**

TITLE **D** ☒ Delete  
NAME **GUFFIN, SHERRY**  
STREET ADDRESS **3585 S.W. QUAIL MEADOW TRAIL**  
CITY-ST-ZIP **PALM CITY FL 34990**

TITLE **S** ☒ Delete  
NAME **JOHNSON, MOE**  
STREET ADDRESS **1637 NE NAUTICAL PL**  
CITY-ST-ZIP **JENSEN BEACH FL 34957**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☐ Change ☒ Addition  
NAME **RONALD P. COOK**  
STREET ADDRESS **8032 SE SEQUOIA DRIVE**  
CITY-ST-ZIP **Hobe Sound, FL 33455**

TITLE **VP, S** ☐ Change ☒ Addition  
NAME **TINA COOK**  
STREET ADDRESS **8032 SE SEQUOIA DRIVE**  
CITY-ST-ZIP **Hobe Sound, FL 33455**

TITLE **D** ☒ Change ☐ Addition  
NAME **Stephen J. Jester**  
STREET ADDRESS **691 SE Thruway Ave**  
CITY-ST-ZIP **Port St. Lucie, FL 34994**

TITLE **D** ☐ Change ☒ Addition  
NAME **William A. Heuermann**  
STREET ADDRESS **2 ARCO ST.**  
CITY-ST-ZIP **JENSEN BEACH, FL 34997**

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
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 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: *Ronald P. Cook Tina Cook VP* *4/15/03* *772-463-3133*

CR2E037 (10/02)