

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000022618

FILED
Apr 30, 2004
Secretary of State

Entity Name: STEPPING STONE CLINIC, INC.

Current Principal Place of Business:

1906 GLENGARY STREET
SARASOTA, FL 34231

New Principal Place of Business:

9070 58TH DRIVE EAST #102
BRADENTON, FL 34202

Current Mailing Address:

1906 GLENGARY STREET
SARASOTA, FL 34231

New Mailing Address:

9070 58TH DRIVE EAST #102
BRADENTON, FL 34202

FEI Number: 65-0995241

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WALD, ROGER C JR
124 SOUTH PINEAPPLE AVENUE
SARASOTA, FL 34236 US

Name and Address of New Registered Agent:

WALD, PAMELA S
9070 58TH DRIVE EAST #102
BRADENTON, FL 34202 US

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: PAMELA WALD

04/30/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WALD, ROGER C JR
Address: 1906 GLENGARY STREET
City-St-Zip: SARASOTA, FL 34231

Title: D () Delete
Name: WALD, PAMELA S
Address: 1906 GLENGARY STREET
City-St-Zip: SARASOTA, FL 34231

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WALD, ROGER C JR
Address: 9070 58TH DRIVE EAST #102
City-St-Zip: BRADENTON, FL 34202

Title: PD (X) Change () Addition
Name: WALD, PAMELA S
Address: 9070 58TH DRIVE EAST #102
City-St-Zip: BRADENTON, FL 34202

I hereby certify that the information supplied with this filing does not qualify for the 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PAMELA WALD

PD

04/30/2004

Electronic Signature of Signing Officer or Director

Date