

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000114141

FILED
Apr 30, 2009
Secretary of State

Entity Name: A STEP BEYOND CONSULTING INC

Current Principal Place of Business:

6080 GULF BREEZE PKWY.
GULF BREEZE, FL 32563

New Principal Place of Business:

216 E. GOVERNMENT STREET
PENSACOLA, FL 32502

Current Mailing Address:

P.O. BOX 1563
GULF BREEZE, FL 32562

New Mailing Address:

FEI Number: 20-1452924 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HICKEY, RAYMOND G
913 GULF BREEZE PKWY
STE # 5
GULF BREEZE, FL 32561 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MCDONALD, DALE
Address: 1958 COSTA VERDE CT.
City-St-Zip: NAVARRE, FL 32566

Title: D () Delete
Name: MCDONALD, JANET
Address: 1958 COSTA VERDE CT.
City-St-Zip: NAVARRE, FL 32566

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DALE MCDONALD

D

04/30/2009

Electronic Signature of Signing Officer or Director

Date