2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P06000083073

FILED Oct 28, 2008 Secretary of State

Entity Name: 3RD STEP RECOVERY HOUSING GROUP, INC. **Current Principal Place of Business: New Principal Place of Business:** 547 NW 9TH AVENUE SUITE #1 FT. LAUDERDALE, FL 33311 **New Mailing Address: Current Mailing Address:** PO BOX 14303 FT. LAUDERDALE, FL 33302 FEI Number: 61-1511845 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FREEMAN, MARIA 547 NW 9TH AVENUE SUITE #1 FT. LAUDERDALE, FL 33311 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition FREEMAN, MARIA Name: Name: 547 NW 9TH AVENUE, SUITE #1 Address: City-St-Zip: FT. LAUDERDALE, FL 33311 City-St-Zip:

Address:

Title: VP,T () Delete Title: (X) Change () Addition

Name: ANDERSON, CHENARA Name: ANDERSON, CHENARA 547 NW 9TH AVENUE, SUITE #1 Address: 547 NW 9TH AVENUE, SUITE #1 Address: FT. LAUDERDALE, FL 33311 FT. LAUDERDALE, FL 33311 City-St-Zip: 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: MARIA FREEMAN **PRES** 10/28/2008