

FILED

Mar 18 1997 8:00am
Secretary of State

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

TRANSFORMATION HOUSE, INC.

Marling Address

729 LAUREL DRIVE
LAKE PARK FL 33403-2120

2a. Mailing Address

26] 735 Laurel Dr
Suite, Apt. #, etc

City & State Lake Park FL

28	Zip	Country
29	32903	USA

9. Name and Address of Current Registered Agent

3a. Date of Last Report
06/11/1996

Applied For
Not Applicable

**\$8.75 Additional
Fee Required**

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81	Name	William H. Leitch
82	Street Address (P.O. Box Number is Not Acceptable)	935 Laurel Dr
83		
84	City	LAKE PARK FL 8

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE [Signature]
Signature, typed or printed name of respondent agent, and title if applicable.

(NOTE: Registered Agent signature required when reissuing.)

[1A7E]

12. OFFICERS AND DIRECTORS

□ DEFT

□ CHEIL

☐ DELETE

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~~SECRET~~

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☒ Addition☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition☒ Change ☐ Addition☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if charged, or in an attachment with an address.

CR2E037 (9/96)