I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CYNTHIA H. SINCLAIR

Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N22077

Entity Name: FLORIDA RESURRECTION HOUSE, INC.

Current Principal Place of Business:

800 11TH STREET N SAINT PETERSBURG, FL 33705

Current Mailing Address:

800 11TH STREET N OFFICE SAINT PETERSBURG, FL 33705 US

FEI Number: 59-2837168

Name and Address of Current Registered Agent:

SINCLAIR, CYNTHIA H 4783 PALERMO CT, NE SAINT PETERSBURG, FL 33703 US Certificate of Status Desired: No

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

Officer/Director Detail :

Title	CD	Title	VC
Name	ALEXANDER, BRONSON	Name	DOYLE, JILLIAN D.
Address	4310 MILLER DRIVE	Address	625 20TH AVENUE NE
City-State-Zip:	ST. PETE BEACH FL 33706	City-State-Zip:	SAINT PETERSBURG FL 33704
Title	PCEO	Title	SD
Title Name	PCEO SINCLAIR, CYNTHIA H	Title Name	SD TIGHE, CHELLEY
Name	SINCLAIR, CYNTHIA H	Name	TIGHE, CHELLEY

PRESIDENT & CEO

03/20/2014

Date

Date