2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#718168

Entity Name: HAPPY HOUSE, INC.

FILED Jan 29, 2007 Secretary of State

544 NW LAKE JEFFERY RD P O BOX 1282

LAKE CITY, FL 320561282

Current Mailing Address:

New Mailing Address:

LAKE CITY, FL 32055

544 NW LAKE JEFFERY RD

LAKE JEFFERY RD P O BOX 1282

LAKE CITY, FL 320561282

FEI Number: 59-1294906 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:

JOPLING, WALLACE M 327 N HERNANDO STREET LAKE CITY, FL 32055 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:

Fitle: D () Delete Title: D (X) Change () Addition

 Name:
 MCGLAMERY, BARBARA
 Name:
 WALKER, SHERYLL

 Address:
 809 SW SUMMER BREEZE
 Address:
 PO BOX 1282

 City-St-Zip:
 LAKE CITY, FL 32025
 City-St-Zip:
 LAKE CITY, FL 32056

Title: D () Delete Title: S (X) Change () Addition

Name:SPRING, JUDYName:SPRING, JUDYAddress:1612 NW FRONTIER DR.Address:1612 NW FRONTIER DR.

City-St-Zip: LAKE CITY, FL 32055 City-St-Zip: LAKE CITY, FL 32055

Title: CD () Delete Title: () Change () Addition

 Name:
 PERSONS, JOE
 Name:

 Address:
 801 SW SEMINOLE TERR
 Address:

 City-St-Zip:
 LAKE CITY, FL 32024
 City-St-Zip:

 $\label{eq:continuous} {\sf Title:} \qquad {\sf C} \qquad {\sf () Delete} \qquad \qquad {\sf Title:} \qquad {\sf () Change () Addition}$

 Name:
 WHEELER, LORRIE
 Name:

 Address:
 272 SW BENTLEY PL
 Address:

 City-St-Zip:
 LAKE CITY, FL 32055
 City-St-Zip:

 Name:
 KELLY, VERONICA
 Name:

 Address:
 139 NW HERON GLEN
 Address:

 City-St-Zip:
 LAKE CITY, FL 32055
 City-St-Zip:

Title: D () Delete Title: CO-C (X) Change () Addition

 Name:
 SMITH, GEORGIA
 Name:
 SGANGA, JACKIE

 Address:
 PO BOX 1792
 Address:
 1784 SW PALOMA COUTY

 City-St-Zip:
 LAKE CITY, FL 32056 US
 City-St-Zip:
 LAKE CITY, FL 32025 US

I hereby certify that the information supplied with this filing does not qualify for the 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SHERYLL WALKER D 01/29/2007