

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # 767021**

1. Entity Name

THE CHRYSALIS HOUSE, INC.**FILED**
Apr 12, 2001 8:00 am
Secretary of State

03-21-2001 90067 050 ****61.25

Principal Place of Business 5904 S. SWITZER AVENUE TAMPA FL 33611 US	Mailing Address P.O. BOX 270686-13872 TAMPA F. 33688-33621-0872 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State	4. FEI Number 59-2288756	Applied For Not Applicable
Zip	Country	Zip	Country

6. Name and Address of Current Registered Agent KUHN, SHAWN 13718 STAGHORN ROAD TAMPA FL 33628	7. Name and Address of New Registered Agent Name: DIANA R. HABBE Street Address (P.O. Box Number Is Not Acceptable): 5009 W. COLONIAL DR #3 City: TAMPA, FL Zip Code: 33611
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8. 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: <i>Diana R Habbe, Treasurer</i> 3/15/01 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HERBERT, PATRICIA 6703 GILDA DRIVE TAMPA FL 33625 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	"D" PRESIDENT ALEX PETRILAK 13617 CLUBSIDE DR TAMPA, FL 33624 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EXEC. DIRECTOR BARRY, BILL 17924 SPENCER RD. ODESSA FL 33556 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	"D" ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KUHN, SHAWN 13718 STAGHORN ROAD TAMPA FL 33636 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	"D" TREASURER DIANA R. HABBE 5009 W. COLONIAL DR #3 TAMPA, FL 33611-3737 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	"D" SECRETARY JANE HAYDEN 4004 S. MANHATTAN AVE #24 TAMPA, FL 33611 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	"D" VICE PRESIDENT LAURIE MASK 14056 TROUVILLE DR TAMPA, FL 33624 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.
SIGNATURE: <i>Diana R Habbe</i> 3/15/01 (813) 831-8840 Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E037 (10/00)