

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 767021

FILED
May 19, 2004
Secretary of State

Entity Name: THE CHRYSALIS HOUSE, INC.

Current Principal Place of Business:

5904 S. SWITZER AVENUE
TAMPA, FL 33611 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 13872
TAMPA, FL 336813872 US

New Mailing Address:

FEI Number: 59-2288756

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HABBE, DIANA R
5009 W COLONIAL DR #3
TAMPA, FL 33611 US

Name and Address of New Registered Agent:

MULLIGAN, ANDREW J
8602 TANGLEVINE LANE
APT #103
TAMPA, FL 33614 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: ANDREW J. MULLIGAN

05/19/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: KUHN, SHAWN
Address: 13718 STAGHORN RD
City-St-Zip: TAMPA, FL 33626

Title: DVP () Delete
Name: BARRY, WILLIAM J
Address: 10304 CARROLLSHORES PLACE
City-St-Zip: TAMPA, FL 33635

Title: DT () Delete
Name: HABBE, DIANA R
Address: 5009 W COLONIAL DRIVE #3
City-St-Zip: TAMPA, FL 336113737

Title: DS () Delete
Name: MARIANI, WENDY
Address: 8923 SOUTH MOBLEY ROAD
City-St-Zip: ODESSA, FL 33556

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: PETRILAK, ALEX
Address: 13617 CLUBSIDE DRIVE
City-St-Zip: TAMPA, FL 33624

Title: DVP (X) Change () Addition
Name: RICE, BETSY J
Address: 5203 BAYSHORE BLVD. #12
City-St-Zip: TAMPA, FL 33611

Title: DT (X) Change () Addition
Name: MULLIGAN, ANDREW J
Address: 8602 TANGLEVINE LANE APT #103
City-St-Zip: TAMPA, FL 33614

Title: DS (X) Change () Addition
Name: REZLER, FRED
Address: 12902 PITTSFIELD AVENUE
City-St-Zip: TAMPA, FL 33624

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ANDREW J. MULLIGAN

DT

05/19/2004

Electronic Signature of Signing Officer or Director

Date