2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000004219

Entity Name: THE INTERPRETER'S HOUSE, INC.

FILED Feb 16, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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5137 CASTELLO DRIVE #1 1575 CLERMONT DRIVE NAPLES, FL 34103 202

NAPLES, FL 34109

Current Mailing Address: New Mailing Address:

5137 CASTELLO DRIVE #1 1575 CLERMONT DRIVE NAPLES, FL 34103

202

NAPLES, FL 34109

FEI Number: 26-2548562 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MCKEAG, IAN SOUTHARD, DONNA 5137 CASTELLO DRIVE #1 1575 CLERMONT DRIVE NAPLES, FL 34103 202 NAPLES, FL 34109 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: DONNA SOUTHARD 02/16/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete () Change (X) Addition

SOUTHARD, SAMUEL Name: Name:

Address: Address: 1575 CLERMONT DRIVE #202

City-St-Zip: City-St-Zip: NAPLES, FL 34109

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

SOUTHARD, DONNA Name: Name: Address: Address: 1575 CLERMONT DRIVE #202

City-St-Zip: City-St-Zip: NAPLES, FL 34109

I hereby certify that the information supplied with this filing does not qualify 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: DONNA SOUTHARD S, T 02/16/2009