

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N09000004798

FILED  
Mar 23, 2011  
Secretary of State

Entity Name: CHOICES HOUSE INC.

**Current Principal Place of Business:**

6220 HEDGESPARROWS LANE  
SANFORD, FL 32771

**New Principal Place of Business:**

**Current Mailing Address:**

5224 W STATE ROAD 46  
BOX 325  
SANFORD, FL 32771

**New Mailing Address:**

FEI Number: 26-4832504

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

THOMAS, CHARVELLE COO  
6220 HEDGESPARROWS LANE  
SANFORD, FL 32771 US

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

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:**

Title: CEO  
Name: THOMAS, SHANNON L SR.  
Address: 6220 HEDGESPARROWS LANE  
City-St-Zip: SANFORD, FL 32771

Title: COO  
Name: THOMAS, CHARVELLE L  
Address: 6220 HEDGESPARROWS LANE  
City-St-Zip: SANFORD, FL 32771

Title: VP  
Name: THOMAS, LAKEISHA  
Address: 3733 WEETAMOO CIR  
City-St-Zip: ORLANDO, FL 32809

Title: SECR  
Name: THOMAS, CHARVELLE  
Address: 6220 HEDGESPARROWS LANE  
City-St-Zip: SANFORD, FL 32771

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: CHARVELLE THOMAS

COO

03/23/2011

Electronic Signature of Signing Officer or Director

Date