## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49682

Entity Name: LISA MERLIN HOUSE, INC.

FILED Feb 11, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3101 NO. PINE HILLS RD.
ORLANDO, FL 32808 US
3101 NORTH PINE HILLS RD.
ORLANDO, FL 32808 US
ORLANDO, FL 32808 US

Current Mailing Address: New Mailing Address:

3101 NO. PINE HILLS RD.
ORLANDO, FL 32808 US
3101 NORTH PINE HILLS RD.
ORLANDO, FL 32808 US

FEI Number: 59-3132600 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:

MERLIN, LISA
9215 LONGFELLOW PL

MERLIN, LISA
508 MAJORCA AVE

APOPKA, FL 32703 US ALTAMONTE SPRINGS, FL 32714 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: LISA MERLIN 02/11/2004

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 JOHNSON, JENNA
 Name:
 ELLIOTT, FRANKIE C

 Address:
 2739 S. MAGUIRE RD.
 Address:
 1330 LEE RD

 City-St-Zip:
 OCOEE, FL 34761
 City-St-Zip:
 ORLANDO, FL 32810

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

 Name:
 TRAMELL, FRED
 Name:

 Address:
 410 CHASE HOME COVE
 Address:

 City-St-Zip:
 LAKE MARY, FL 32746
 City-St-Zip:

Title: TD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 GREER, HOLLY
 Name:

 Address:
 215 N. EOLA DR.
 Address:

 City-St-Zip:
 ORLANDO, FL 32801
 City-St-Zip:

 $\label{eq:time_def} \mbox{Title:} \qquad \mbox{D} \qquad \mbox{() Delete} \qquad \qquad \mbox{Title:} \qquad \mbox{() Change () Addition}$ 

 Name:
 LAMBERT, JOANNE
 Name:

 Address:
 390 NORTH ORANGE AVE #1285
 Address:

 City-St-Zip:
 ORLANDO, FL 32801
 City-St-Zip:

Title: VPD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BOZZUTO, JACQUELINE
 Name:

 Address:
 215 N. EOLA DR.
 Address:

 City-St-Zip:
 ORLANDO, FL 32801
 City-St-Zip:

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: FRED H TRAMELL CD 02/11/2004