2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001315

FILED May 27, 2009 Secretary of State

Entity Name: THE ATHENA HOUSE CORPORATION, INC.

Current Principal Place of Business: New Principal Place of Business: 249 JOHN KNOX RD STE 100 TALLAHASSEE, FL 32303 **Current Mailing Address: New Mailing Address:** P.O. BOX 37305 P.O. BOX 10063 TALLAHASSEE, FL 32315 TALLAHASSEE, FL 32312 FEI Number: 59-3304257 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: O'LEARY, PATRICK 249 JOHN KNOX RD STE 100 TALLAHASSEE, FL 32303 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete GAVALAS, MIKE Name: Name: 212 S. MONROE STREET Address: Address: City-St-Zip: TALLAHASSEE, FL 32301 City-St-Zip: Title: () Delete Title: () Change () Addition BERTO, ROBERT L Name: Name: Address: 8225 OVERVIEW COURT Address: City-St-Zip: ROSWELL, GA 30076 City-St-Zip: Title: PD () Delete Title: () Change () Addition OLEARY, PATRICK G Name: Name: 6130 BORDERLINE DR. Address: Address: City-St-Zip: TALLAHASSEE, FL 32312 City-St-Zip: Title: VPD () Delete Title: VPD (X) Change () Addition Name: COREY, ADAM Name: CARNES, ROBERT VPD Address: 2006 ALTON RD Address: 518 NORTH RIDE City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: TALLAHASSEE, FL 32303 Title: () Delete Title: (X) Change () Addition YOWONSKY, MICHAEL YAWORSKY, MICHAEL SD Name: Name: 2112 SCENIC RD 2112 SCENIC ROAD Address: Address: City-St-Zip: TALLAHASSEE, FL 32303 City-St-Zip: TALLAHASSEE, FL 32303 Title: (X) Delete Title: () Change () Addition CARNES, BOB Name: Name: Address: 518 N. RIDE Address: TALLAHASSEE, FL 32303 City-St-Zip: City-St-Zip:

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: PATRICK G. O'LEARY PRES 05/27/2009