

# **2010 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P01000117340

**Entity Name:** HOUSE STABILITIES, INC.

**FILED**  
**Jul 09, 2010**  
**Secretary of State**

**Current Principal Place of Business:**

7143 STATE ROAD 54  
SUITE 275  
NEW PORT RICHEY, FL 34653

**New Principal Place of Business:**

**Current Mailing Address:**

7143 STATE ROAD 54  
SUITE 275  
NEW PORT RICHEY, FL 34653

**New Mailing Address:**

**FEI Number:** 59-3760575

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MOUNTAIN, CRAIG  
5031 ENSIGN LOOP  
NEW PORT RICHEY, FL 34652 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: PRES  
Name: MOUNTAIN, CRAIG  
Address: 5031 ENSIGN LOOP  
City-St-Zip: NEW PORT RICHEY, FL 34652

Title: VP  
Name: DRUNASKY, THOMAS  
Address: 6042 DELAWARE AVE.  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: SEC  
Name: DRUNASKY, TOM  
Address: 6042 DELAWARE AVENUE  
City-St-Zip: NEW PORT RICHEY, FL 34653

Title: TRES  
Name: MOUNTAIN, CRAIG  
Address: 5031 ENSIGN LOOP  
City-St-Zip: NEW PORT RICHEY, FL 34652

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: CRAIG MOUNTAIN

PRES

07/09/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date