

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000151996

Entity Name: TRANSITION OPTIONS, INC.

FILED
Apr 29, 2011
Secretary of State

Current Principal Place of Business:

499 E CENTRAL PKWY
STE 235
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

Current Mailing Address:

499 E CENTRAL PKWY
STE 235
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

FEI Number: 20-0505946

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BURKE, CATHERINE A
499 E CENTRAL PKWY
STE 235
ALTAMONTE SPRINGS, FL 32701 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: CROSSMAN BURKE, CATHERINE
Address: 135 HILLTOP PLACE
City-St-Zip: ALTAMONTE SPRINGS, FL 32701

Title: COO
Name: HARPER, TRACY
Address: 1224 SUNSHINE TREE BLVD
City-St-Zip: LONGWOOD, FL 32779

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: CATHERINE CROSSMAN BURKE

CEO

04/29/2011

Electronic Signature of Signing Officer or Director

Date