

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000041799

Entity Name: COTTAGE HOUSE, INC.

FILED  
Apr 23, 2009  
Secretary of State

## Current Principal Place of Business:

1117 JENKS AVENUE  
PANAMA CITY, FL 32401 US

## New Principal Place of Business:

## Current Mailing Address:

2946 JEFFERSON STREET  
MARIANNA, FL 32446 US

## New Mailing Address:

P.O. BOX 1504  
MARIANNA, FL 32447 US

FEI Number: 71-1031539

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MARIANNA MENTAL HEALTH CENTER, INC  
2946 JEFFERSON STREET  
MARIANNA, FL 32446 US

## Name and Address of New Registered Agent:

MARIANNA MENTAL HEALTH CENTER, INC  
2496 INDIAN SPRINGS ROAD  
MARIANNA, FL 32446 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: GEORGE L. HORVAT

04/23/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: HORVAT, GEORGE L PH.D.  
Address: 2946 JEFFERSON STREET  
City-St-Zip: MARIANNA, FL 32446 US

Title: VP (X) Delete  
Name: HERRING, LAURIE  
Address: 1117 JENKS AVENUE  
City-St-Zip: PANAMA CITY, FL 32401 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: HORVAT, GEORGE L PH.D.  
Address: 2496 INDIAN SPRINGS ROAD  
City-St-Zip: MARIANNA, FL 32446 US

Title: ( ) Change ( ) Addition  
Name:  
Address:  
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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GEORGE L. HORVAT

PRES

04/23/2009

Electronic Signature of Signing Officer or Director

Date