

**2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P15000034507

**Entity Name:** STORYHOUSE, INC.

**Current Principal Place of Business:**

10619 CASA GRANDE DR  
JACKSONVILLE, FL 32257

**Current Mailing Address:**

10619 CASA GRANDE DRIVE  
JACKSONVILLE, FL 32257 US

**FEI Number: 47-3739098**

**Certificate of Status Desired: Yes**

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

LOEUNG, THEA  
10619 CASA GRANDE DRIVE  
JACKSONVILLE, FL 32257 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title           DPS  
Name           LOEUNG, THEA  
Address        10619 CASA GRANDE DRIVE  
City-State-Zip: JACKSONVILLE FL 32257

*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: THEA LOEUNG**

**PRESIDENT**

**02/03/2017**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date