

FILE NOW: FILING FEE IS \$61.25

FILED

Jan 27 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 709348 (7)

1. Corporation Name

HAVEN HOUSE NO. 3. INC., A CONDOMINIUM



Principal Place of Business

Mailing Address

1250 N E 36TH STREET
POMPANO BEACH FL 33064

1250 N E 36TH STREET
POMPANO BEACH FL 33064-6288

3. Date Incorporated or Qualified
07/22/1965

3a. Date of Last Report
03/08/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
59-1158445

Applied For
 Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes Yes No

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CUOZZO, DOROTHY
1260 N.E. 36TH STREET
POMPANO BEACH FL 33064

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ST DELETE
NAME MERWITZ, LORETTA
STREET ADDRESS 1250 N.E. 36TH ST.
CITY-ST-ZIP POMPANO BCH. FL

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE D DELETE
NAME BRUNNER, EVELYN
STREET ADDRESS 1250 N.E. 36TH ST.
CITY-ST-ZIP POMPANO BEACH FL

2.1 TITLE Change Addition
2.2 NAME D
2.3 STREET ADDRESS NICHOLAS PARKINSON
2.4 CITY-ST-ZIP 1250 N.E. 36TH ST.
POMPANO BEACH FL.

TITLE D DELETE
NAME SPENCER, MARIE
STREET ADDRESS 1250 NE 36TH ST
CITY-ST-ZIP POMPANO BCH. FL

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE VP DELETE
NAME ZIRBES, JOE
STREET ADDRESS 1250 NE 36TH STREET
CITY-ST-ZIP POMPANO BEACH FL

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE P DELETE
NAME CUOZZO, DOROTHY
STREET ADDRESS 1250 NE 36TH ST
CITY-ST-ZIP POMPANO BCH FL

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE D DELETE
NAME CACARAS, SONYA
STREET ADDRESS 1250 N E 36TH STREET
CITY-ST-ZIP POMPANO BEACH FL 33064

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dorothy Cuozzo 1-9-97

Daytime Phone # 0021953

CR2E037 (9/96)