## 2000 UNIFORM BUSINESS REPORT (UBR)

## **FILED** Feb 27, 2000 8:00 am Secretary of State **DOCUMENT # 725729** 1. Entity Name THE HAVEN CENTER, INC. 02-27-2000 90005 001 \*1,050.00 Principal Place of Business Mailing Address 9040 SUNSET DR 9040 SUNSET DRIVE ATTN LESLIE W LEECH MIAMI FL 33173 MIAMI FL 33173-3432 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number 59-0668484 Not Applicable Country Zip \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Street Address (P.O. Box Number is Not Acceptable) LEECH, LESLIE W JR. 9040 SUNSET DR **MIAMI FL 33173** Zip Code FL 8. 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE. Registered Agent signature required when reinstating) 9. Election Campaign Financing Make Check Payable to FILE NOW: \$5.00 May Be Trust Fund Contribution. Added to Fees **Department of State FEE IS \$61.25** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | OFFICERS AND DIRECTORS 11. 10. ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME TUCKER, GERALDINE STREET ADDRESS STREET ADDRESS 8100 SW 133RD CT CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33183 ☐ Addition ☐ Delete ☐ Change TITLE TITLE NAME NAME GREENBERG, BARNETT A STREET ADDRESS STREET ADDRESS 7761 SW 176 ST CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33157 ☐ Delete ☐ Change ☐ Addition TITLE TITLE NAME NAME WETHERINGTON, GLORIA A STREET ADDRESS STREET ADDRESS 3320 NE 18TH TERR CITY-ST-ZIP CITY-ST-ZIP <u>OAKLAND PARK FL 33306</u> Addition ☐ Change TITLE Delete TITLE NAME NAME , HERZOG, MELISSA STREET ADDRESS STREET ADDRESS 7725 SW 88TH ST CITY-ST-ZIP CITY-ST-ZIP MIAMI FL 33156 Tris Vacker 400 Leslie Dr. #520 Addition Delete TITLE Change TITLE Duplicate HERZOG, MELISSA NAME NAME Hallendale, FL 33009 STREET ADDRESS STREET ADDRESS 7725 SW 88TH STREET CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33156** TITLE ☐ Change Addition ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I 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 report or supplemental 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 10 or Block 11 if

changed, or on an attachment with an address, with all other like empowered