

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000009621

FILED  
Mar 07, 2011  
Secretary of State

**Entity Name:** HAVEN RANCH, INC.

**Current Principal Place of Business:**

7333 COUNTY RD. 208  
ST. AUGUSTINE, FL 32092

**New Principal Place of Business:**

**Current Mailing Address:**

7333 COUNTY RD. 208  
ST. AUGUSTINE, FL 32092

**New Mailing Address:**

FEI Number: 26-3651788

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

GORMAN, DAVID  
328 LAUDEN COURT  
PONTE VEDRA BEACH, FL 32082 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: P  
Name: LEHMAN, RIC  
Address: 7333 COUNTY RD. 208  
City-St-Zip: ST. AUGUSTINE, FL 32092

Title: ST  
Name: GORMAN, DAVID  
Address: 328 LAUDEN COURT  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: D  
Name: NORTON, RICHARD  
Address: 1208 REDCLIFF LANE  
City-St-Zip: ST. AUGUSTINE, FL 32095

Title: D  
Name: TILLMAN, JANET  
Address: 5090 ST. AMBROSE CHURCH RD.  
City-St-Zip: ELKTON, FL 32033

Title: D  
Name: MARKS, ANNIE  
Address: 5455 A1A SOUTH  
City-St-Zip: ST. AUGUSTINE, FL 32080

Title: D  
Name: GRISWOLD, DAVID  
Address: 240 CLEARWATER  
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RIC LEHMAN

P

03/07/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date