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Jan 25, 1999 8:00am
Secretary of State

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NONPROFIT
CORPORATION
ANNUAL REPORT
1999FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 709348

1. Corporation Name

HAVEN HOUSE NO. 3. INC., A CONDOMINIUM

Principal Place of Business

1250 N E 36TH STREET
POMPANO BEACH FL 33064

Mailing Address

1250 N E 36TH STREET
POMPANO BEACH FL 33064

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

07/22/1965

4. FEI Number

59-1158445

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

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

TITLE ST ☐ DELETE
NAME MERWITZ, LORETTA
STREET ADDRESS 1250 N.E. 36TH ST.
CITY-ST-ZIP POMPANO BCH. FLTITLE D ☐ DELETE
NAME NICHOLAS, PARKINSON
STREET ADDRESS 1250 NE 36TH ST
CITY-ST-ZIP POMPANO BEACH FLTITLE D ☐ DELETE
NAME SPENCER, MARIE
STREET ADDRESS 1250 NE 36TH ST
CITY-ST-ZIP POMPANO BCH. FLTITLE VP ☐ DELETE
NAME ZIRBES, JOE
STREET ADDRESS 1250 NE 36TH STREET
CITY-ST-ZIP POMPANO BEACH FLTITLE P ☐ DELETE
NAME CUOZZO, DOROTHY
STREET ADDRESS 1250 NE 36TH ST
CITY-ST-ZIP POMPANO BCH FLTITLE D ☐ DELETE
NAME BRANDON, SYLVIA
STREET ADDRESS 1250 N.E. 36TH STREET
CITY-ST-ZIP POMPANO BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dorothy Cuozzo 946-6487
Date 1/25/99 Daytime Phone #

CR2E037 (1/98)