2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 25, 2009
Secretary of State

DOCUMENT# 212849

Entity Name: RESTHAVEN GARDENS INC

Current Principal Place of Business:

1084 W. MASS. AVE.
PENSACOLA, FL 32505 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 2292
PENSACOLA, FL 325132292 US

New Mailing Address:

FEI Number: 59-0826910 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COKER HOLT, IRIS C
2028 DOWNING DRIVE
PENSACOLA, FL 32505 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

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: COKER HOLT, IRIS C
Address: 2028 DOWNING DR.
City-St-Zip: PENSACOLA, FL

Title: VD ( ) Delete
Name: MAGINNESS, MARY E,
Address: 8709 11TH AVE. PLACE N.W
City-St-Zip: BRADENTON, FL

Title: SD ( ) Delete
Name: MAGINNESS, MARY E
Address: 8709 11TH AVE PLACE NW
City-St-Zip: BRADENTON, FL

Title: D ( ) Delete
Name: REMEL, LINDA A
Address: 2028 DOWNING DR
City-St-Zip: PENSACOLA, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: COKER HOLT, IRIS C
Address: 2028 DOWNING DR.
City-St-Zip: PENSACOLA, FL 32505 US

Title: VD (X) Change ( ) Addition
Name: MAGINNESS, MARY E,
Address: 8709 11TH AVE. PLACE N.W
City-St-Zip: BRADENTON, FL 34209 US

Title: SD (X) Change ( ) Addition
Name: MAGINNESS, MARY E
Address: 8709 11TH AVE PLACE NW
City-St-Zip: BRADENTON, FL 34209 US

Title: D (X) Change ( ) Addition
Name: REMEL, LINDA A
Address: 2028 DOWNING DR
City-St-Zip: PENSACOLA, FL 32505 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: IRIS COKER HOLT PD 02/25/2009

Electronic Signature of Signing Officer or Director Date