

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 701494

**FILED**  
**Apr 18, 2012**  
**Secretary of State**

**Entity Name:** FLORIDAHAVEN ASSOCIATION, INC.

**Current Principal Place of Business:**

270 LAKE SEMINARY CIRCLE  
MAITLAND, FL 32751 US

**New Principal Place of Business:**

**Current Mailing Address:**

270 LAKE SEMINARY CIRCLE  
MAITLAND, FL 32751 US

**New Mailing Address:**

**FEI Number:** 59-3634013

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CLUGGISH, IRIS  
270 LAKE SEMINARY CIRCLE  
MAITLAND, FL 32751 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: TD  
Name: CLUGGISH, IRIS  
Address: 270 LAKE SEMINARY CIRCLE  
City-St-Zip: MAITLAND, FL 32751

Title: VD  
Name: SCRIBNER, SAM  
Address: 355 LAKE SEMINARY CIRCLE  
City-St-Zip: MAITLAND, FL 32751

Title: PD  
Name: PEREZ, MARIA  
Address: 350 LAKE SEMINARY CIRCLE  
City-St-Zip: MAITLAND, FL 32751

Title: D  
Name: SHARPSTEIN, ROB  
Address: 310 LAKE SEMINARY CIRCLE  
City-St-Zip: MAITLAND, FL 32751

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: IRIS CLUGGISH

TD

04/18/2012

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

\_\_\_\_\_  
Date