


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2005 08:00 AM
Secretary of State

DOCUMENT # 708744	
1. Entity Name HAVEN HOUSE NO. 2 INC., A CONDOMINIUM	

Principal Place of Business 1150 NORTH EAST 36TH STREET 112 POMPANO BEACH, FL 33064	Mailing Address 1150 NORTH EAST 36TH STREET 112 POMPANO BEACH, FL 33064
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01202005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1165926	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

ISRAEL, CHARLES
 1150 NORTH EAST 36TH STREET
 112
 POMPANO BEACH, FL 33064

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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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *Charles B Israel* CHARLES B ISRAEL 1/20/05
Signature typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is \$61.25 Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	PSTD ISRAEL, CHARLES 1150 NORTH EAST 36TH STREET POMPANO BEACH, FL 33064
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD MENUCCI, IRVING 1150 NORTH EAST 36TH STREET POMPANO BEACH, FL 33064
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SUHY, PAUL 1150 NORTH EAST 36TH STREET POMPANO BEACH, FL 33064
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FEJES, BOB 1150 NORTH EAST 36TH STREET POMPANO BEACH, FL 33064
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PAES, ALEX 1150 NORTH EAST 36TH STREET POMPANO BEACH, FL 33064
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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 01/28/05-80009-021 61.25

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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.

SIGNATURE: *Charles B Israel* CHARLES B ISRAEL 1/20/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #