## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 17 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

710208

(0)

HAVEN HOUSE NO. 5 INC. A CONDOMINIUM

Principal Place	e of Business	Mailing Address					BU DIDI UBU
10191 W. SAMPLE ROAD SUITE 203 CORAL SPRINGS FL 33065		10181 W. SAMPLE ROAD SUIET 203 CORAL SPRINGS FL 33065-3976 US			• •	On Date of Land	
US					3. Date Incorporated or Qualified 01/17/1966	3a. Date of Last R 05/14/199	
2. Principal Place of Business 21		2a. Mailing Address			4. FEI Number 59-1154780	Applied For Not Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 Additional Fee Required		Additional
City & State		City & State			6. Election Campaign Financing \$5.00 May Be		
Zip	Country Zip Co		Country			Added !	
24	25	<b>⊢</b> ' ⊢	30 30	-	This corporation has liability for inta- Florida Statutes	angible tax under s. Yes 🔲 No	. 199.032,
24	9, Name and Address of Current		NU		10. Name and Address of New Regis		
ROBINSON, DELIA  1450 NE 36TH ST  POMPANO BEACH FL 33064  B1 Name Tymes Caldorgzo  82 Street Address (P.O. Box Number is Not Acceptable)  10191 W. Sampla Rol  83 203  84 City  Cora / Springs  FL 85 Zip Code  77065							
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 igent, 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		Registered Agent signature	e required v		DATE	
12.	OFFICERS AND		13.	T#	ADDITIONS/CHANGES TO OFFICER		
TITLE	D DODGE DODGE DE	DELETE		0		Change	L. Addition
NAME	KOSTU, DOROTHY		1.2 NAME		œf, Gerald	•	
STREET ADDRESS	1450 NW 36TH STREET		13 STREET ADDRESS	14	50 NE 36th St., #105		
CITY - ST - ZIP	POMPANO, FL 00000	DELETE	1.4 CITY - ST - ZIP	- Pa	n <del>pano Beach, FL 33064 -</del>	Change	Addition
TITLE	D	A OFFICIE	2.1 TITLE	10	me, Margaret	Fact Cusude	☐ Addition
NAME	LIDDLE, EDWARD 1450 NE 36TH STREET		2.2 NAME		50 NE 36th St., #207		1
STREET ADDRESS	POMPANO, FL 00000		2.3 STREET ADDRESS	,	mpano Beach, FL 33064		ł
CITY-ST-ZIP	D	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE	+		Change	Addition
NAME	TURNER, KEITH	- DECEME	3.2 NAME	D KO	stu, Dorothy	T change	
STREET ADDRESS	1450 NE 36TH STREET		3.3 STREET ADDRESS		50 NE 36th St., #102		
CITY-ST-ZIP	POMPANO, FL 00000		3.4. CITY-ST-ZIP	Par	mpano Beach, FL 33064		
TITLE	D	DELETE	4.1 TITLE	D		Change	Addition
NAME	BYRNE, MARGARET	•	4. 2 NAME	Liu	ddle, Ed	~	
STREET ADDRESS	1450 NE 36TH STREET		4.3 STREET ADDRESS		50 NE 36th St., #109		
CITY-ST-ZIP	POMPANO, FL 33064		4.4 CITY - ST - ZIP		mpano Bench, FL 33064		
TITLE		☐ DELETE	5.1 TITLE	む…	Thinke & Co. Landeled	☐ Change	Addition
NAME			5.2 NAME	fu	SONO 36haldla		
STREET ADDRESS			5.3 STREET ADDRESS	'7	SONE 36th St. # 201 ompares Beach 3306		
CITY-ST-ZIP			5.4 CITY-ST-ZIP	_ P	suprius beneh 3306	4	
TITLE		☐ DELETE	6.1 TITLE			Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			63 STREET ADDRESS				[
CITY-ST-ZIP		70 No. 10 Page	6.4 CITY - ST - ZIP	<u> </u>		·	
14. I do 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.							