FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL RÉPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

710208

(0)

HAVEN HOUSE NO. 5 INC. A CONDOMINIUM

	F	FILED)
Mar	12	1998	8:00am
Se	cret	tary o	f State

Principal Plac	e of Business	Mailing Address		
1450 N.E. 36 STREET		1450 N.E. 36 STREET		3. Date Incorporated or Qualified
SUITE #105	CH FL 33064-6267	SUITE #105 POMPANO BEACH FL 33064	4.6987	01/17/1966
US	OH FE 330040207	US	1-0201	4. FEI Number Applied For
2. Principal P	Place of Business	2a. Mailing Address 26		5. Certificate of Status Desired S8.75 Additional Fee Required
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & State	0	City & State		7. Is this nonprofit corporation a homeowners association?
23		28		¥ Yes □ No
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24	25		30	Personal Property Tax due June 30. Yes No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Registered Agent
			l ivame	
	GERALD "JERRY"		82 Street	Address (P.O. Box Number is Not Acceptable)
	. 36 STREET		83	
APT. #10				
PUMPAN	IO BEACH FL 33064		84 City	FL 85 Zip Code
11. Pursuant office or r	to the provisions of Sections 617,0502 agistered agent, or both, in the State	and 617,1508, Florida Statute of Florida. Such change was a	s, the above-named uthorized by the cor	d corporation submits this statement for the purpose of changing its registered poration's board of directors. I hereby accept the appointment as registered
agent. I a	m lamiliar with, and accept the apliga-	ions of Section 617.0503, Flor	rida Statutes.	. 1/2
SIGNATURE	Inhature, typed or printed name of Ingistered agen	EVAL GARREST	ALD JER	RY SHOAF 3-3-98 e required when reinstaling) DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE	Change Addition
NAME	SHOAF, GERALD "JERRY"		1.2 NAME	
STREET ADDRESS	1450 N.E. 36 STREET, APT. #	105	1.3 STREET ADDRESS	
CITY-ST-ZIP	POMPANO BEACH FL 33064		1.4 CITY - ST - ZIP	
TITLE	V	→ DELETE	2.1 TITLE	V Change Addition
NAME	LE DLIE, JACK		2.2 NAME	BETTY SHOAF 1450 N.E. 36 STREET #105
STREET ADDRESS	1450 N.E. 36 STREET, #107		2.3 STREET ADDRESS	1450 N.M. 36 STREET #105
CITY-ST-ZIP	POMPANO BEACH FL 33064	· · · · · · · · · · · · · · · · · · ·	2. 4 CITY - ST - ZIP	POMPANO BEACH, FL. 33064
TITLE	T	☐ DELETE	3.1 TITLE	S/T Change 🖫 Additio
NAME	LEDOUX, LUCILLE	_	3.2 NAME	
STREET ADDRESS	1450 N.W. 36TH STREET, #30)	3.3 STREET ADDRESS	
CITY-ST-ZIP	POMPANO FL 33064	IX DELETE	3.4. CITY-ST-ZIP	
TITLE	ODAIO DATDIOIA	LAS VELETE	4.1 TITLE	Change L Additio
NAME	CRAIG, PATRICIA		4. 2 NAME	4//5//2
STREET ADDRESS	1450 N.E. 36 STREET, #304 POMPANO BEACH FL 33064		4.3 STREET ADDRESS	10710
CITY-ST-ZIP TITLE	n	☐ DELETÉ	4.4 CITY - ST - ZIP 5.1 TITLE	L_Cbange Additio
NAME	PIGEON, RENE		5.2 NAME	000002455750
STREET ADORESS	1450 N.E. 38 STREET, #307		5.3 STREET ADDRESS	-05/12/3601034034
CITY-ST-ZIP	POMPANO BEACH FL 33064		5.4 CITY-ST-ZIP	***61.25
TITLE	7 01111 1 0 1 0 1 0 1 1 1 1 0 0 0 0 1	DELETE	6.1 TITLE	D Change Additio
NAME			6.2 NAME	EDWARD LIDDLE
STREET ADDRESS			6.3 STREET ADDRESS	1450 N.E. 36 STREET, #109
CITY-ST-ZIP			6.4 CITY-ST-ZIP	POMPANO BEACH, FL. 33064
14. I hereby o	ertify that the information supplied wit	n this filing does not qualify for	the exemption state	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the information
officer or d Block 12 d	on this annual report of supplemental director of the corporation or the recei or Block 13 if changed, or on an attact	ver or trustee empowered to example with an address.	xecute this report as	gnature shall have the same legal effect as if made under oath; that I am an strequired by Chapter 617, Florida Statutes; and that my name appears in

SIGNATURE: POLO O "GODDY" SERVICE ALD TERRY SHORE 3-3-98 854-941-5625