## 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 722522** 

FILED Feb 08, 2010 Secretary of State

Entity Name: HAVEN COMMUNITY CENTER, INC.

Current Principal Place of Business:

**New Principal Place of Business:** 

1899 2ND STREET N.W.

WINTER HAVEN, FL 338812187

Current Mailing Address: New Mailing Address:

1899 2ND STREET N.W. P.O. BOX 4180

WINTER HAVEN, FL 338812187 WINTER HAVEN, FL 33885

FEI Number: 59-1529393 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

GREENE, ORA H 1899 SECOND STREET NW WINTER HAVEN, FL 33881 US

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: PD

Name: GREENE, ORA H Address: 2006 9TH ST NE

City-St-Zip: WINTER HAVEN, FL 33881

Title: VP

Name: DOLES, BETTY Address: P.O. BOX 3813

City-St-Zip: WINTER HAVEN, FL 33881

Title:

 Name:
 LEONARD, WILLIAM

 Address:
 1079 AVENUE O NE

 City-St-Zip:
 WINTER HAVEN, FL 33881

Title: T

 Name:
 JOHNSON, THELMA

 Address:
 560 SEARS AVENUE NE

 City-St-Zip:
 WINTER HAVEN, FL
 33881

Title: SD

Name: ROUSEFF, JUNE

Address: 298 HERNANDO ROAD SE City-St-Zip: WINTER HAVEN, FL 33884

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: ORA H. GREENE PD 02/08/2010