CR2E037

| SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 19 | 199. |
|--|----------|
| AMOUNT DUE ON OR BEFORE 09/15/99: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$ | 236.25). |

NONPROFIT FLORIDA DEPARTMENT OF STATE FILED CORPORATION Katherine Harris ANNUAL REPORT Secretary of State **DIVISION OF CORPORATIONS** 1999 99 SEP 30 PH 4: 12 DOCUMENT # 738977 SECTEMENT OF STATE TALLAMASSEE, FLORIDA THE HAVEN FOR SPIRITUAL TRAVELERS, INC. Principal Place of Business Mailing Address 1341 S. W. 25TH AVENUE 1341 S. W. 25TH AVENUE FT. LAUDERDALE FL 33312 FT. LAUDERDALE FL 33312 2. Principal Place of Business 2a. Mailing Address 3. Date Incorporated or Qualifed 05/09/1977 21 26 Suite, Apt. #, etc. 4. FFI Number Suite. Apt. #. etc. Applied For 59-1741877 Not Applicable 22 City & State City & State \$8.75 Additional 5. Certificate of Status Desired Fee Required 23 28 Country Zip ZID Country 6. Election Campaign Financing \$5.00 May Be Γ 25 30 Trust Fund Contribution 29 Added to Fees 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name DUKE, EDWARD L. Street Address (P.O. Box Number is Not Acceptable) 1341 S.W. 25TH AVE. 83 FT. LAUDERDALE FL 33312 84 City 85 Zip Code FL 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 agent, 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 and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE 1.1 TITLE Change ☐ Addition THE DUKE, EDWARD L. 12 NAME 1341 S.W. 25TH AVENUE STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP Addition DELETE Change TITLE 2.1 TITLE KAREN LEE SAMSON ROBINSON, TERRI A NAME 2.2 NAME 4149 NWIZTERR 1009 N. OCEAN BLVD. #309 STREET ADDRESS 23 STREET ADDRESS POMPANO FL FT. LAUDERDALE FL. 33309 CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 31TIDE SANDERS, MARGARET 3.2 NAME NAME 6761 NW 32 AVE STREET ADDRESS 3.3 STREET ADDRESS 6000030063350--4 -10/05/39--01405002003Addition ******61.25 *****61.25 FT LAUDERDALE FL CITY-ST-ZIP 3.4. CITY-ST-2IP DELETE 4.1 TITLE TITLE NAUJOKS, NADINE 4. 2 NAME 4144 SW 61 AVE STREET ADDRESS 4.3 STREET ADDRESS DAVIE FL 4.4 CITY-ST-ZIP CiTY-S1-ZiP DELETE TITLE STD 5.1 TITLE Change Addition CRAMASTA, CARMELLA 5.2 NAME NAME 5.3 STREET ADDRESS 6829 N.W. 12TH ST. STREET ADORESS 5.4 CITY-ST-ZIP **PLANTATION FL** CITY-ST-ZIP DELETE 6.1 TITLE Change Addition TITLE VD

STREET ADDRESS

6829 N.W. 12TH ST.

63 STREET ADDRESS

7608 N.W. 5 ST 8 LD6/5, & B

64 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

9/10/11 954-792-3866