

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 766212

FILED
Jan 14, 2008
Secretary of State

Entity Name: W.O.R.C. HAVEN, INC.

Current Principal Place of Business:

1090 JIMMY ANN DR
DAYTONA BEACH, FL 32117 US

New Principal Place of Business:

Current Mailing Address:

1090 JIMMY ANN DR
DAYTONA BEACH, FL 32117 US

New Mailing Address:

FEI Number: 59-2274454

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POLLACK, BARRY
1100 JIMMY ANN DRIVE
DAYTONA BEACH, FL 32117 US

Name and Address of New Registered Agent:

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: SD () Delete
Name: ERTL, CHRISTENE
Address: 1100 JIMMY ANN DRIVE
City-St-Zip: DAYTONA BEACH, FL 32117 US

Title: PD () Delete
Name: KNAEBEL, MICHAEL
Address: 1100 JIMMY ANN DRIVE
City-St-Zip: DAYTONA BEACH, FL 32117

Title: VD () Delete
Name: WALLACE, BERTRAN
Address: 1100 JIMMY ANN DRIVE
City-St-Zip: DAYTONA BEACH, FL 32117

Title: TD () Delete
Name: PARK, LISA
Address: 1100 JIMMY ANN DR.
City-St-Zip: DAYTONA BEACH, FL 32117 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: BARR, ROBIN
Address: 1100 JIMMY ANN DRIVE
City-St-Zip: DAYTONA BEACH, FL 32117 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: BARRY S POLLACK

CEO

01/14/2008

Electronic Signature of Signing Officer or Director

Date