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Feb 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **767323** (9)

1. Corporation Name

HAVEN LAKE ACTIVITY CLUB, INC.

Principal Place of Business

Mailing Address

* MISS ELLEN MCDUFFEE.
11201 S.W. 55 ST., BOX 22, LOT A-23
MIRAMAR FL 33025-0107

BOX 5 LOT A-23
MIRAMAR FL 33025
US

3. Date Incorporated or Qualified
03/07/1983

3a. Date of Last Report
03/15/1996

2 Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number
59-2281504

Applied For
Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐ **\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MCDUFFEE, ELLEN V.
11201 S.W. 55 ST.,
UNIT 5
MIRAMAR FL 33025-3107

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **P** ☐ DELETE

NAME
MCDUFFEE, ELLEN V.
STREET ADDRESS
11201 S.W. 55TH ST. UNIT 5
CITY-ST-ZIP
MIRAMAR FL 33025

TITLE **VP** ☐ DELETE

NAME
YESTER, LOUIS L
STREET ADDRESS
11201 S W 55TH ST. UNIT 180
CITY-ST-ZIP
MIRAMAR FL 33025-3107

TITLE **T** ☐ DELETE

NAME
YESTER, EVELYN R.
STREET ADDRESS
11201 S.W. 55TH ST. UNIT 180
CITY-ST-ZIP
MIRAMAR FL 33025

TITLE **RC** ☐ DELETE

NAME
CONNORS, RUTH
STREET ADDRESS
11201 SW 55 ST. UNIT 289
CITY-ST-ZIP
MIRAMAR FL 33025

TITLE **D** ☐ DELETE

NAME
GOERTIER, GERTRUDE
STREET ADDRESS
11201 S.W. 55TH ST. #106
CITY-ST-ZIP
MIRAMAR FL

TITLE **D** ☐ DELETE

NAME
HELEN TRUXELL
STREET ADDRESS
11201 S. W. 55 ST. #514
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

D ☐ Change ☐ Addition

JACKIE WILMATH
11201 S. W. 55 ST. #106
MIRAMAR, FL 33025

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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 in this annual report or biennial 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.

CR2E037 (9/96)