## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F06000001216

Entity Name: GLEN HAVEN LEASCO, INC.

FILED Apr 26, 2007 Secretary of State

Current Principal Place of Business:	New Principal Place of Business
urrent Principal Place of Business:	New Principal Place of Busines

C/O NATIONAL HOME COMMUNITIES
6991 E CAMELBACK RD STE B-310
SCOTTSDALE, AZ 65251

C/O NATIONAL HOME COMMUNITIES
6991 E CAMELBACK RD STE B-310
SCOTTSDALE, AZ 85251

Current Mailing Address: New Mailing Address:

C/O NATIONAL HOME COMMUNITIES
6991 E CAMELBACK RD STE B-310
SCOTTSDALE, AZ 65251

C/O NATIONAL HOME COMMUNITIES
6991 E CAMELBACK RD STE B-310
SCOTTSDALE, AZ 85251

FEI Number: 20-3905706 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:

C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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:

Election Campaign Financing Trust Fund Contribution ( ).

Electronic Signature of Registered Agent

## OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete

Name: NAPP, DAVID A

Address: 6991 E. CAMELBACK RD STE B-310

City-St-Zip: SCOTTSDALE, AZ 65251

Title: VT () Delete
Name: EDWARDS, COLLEN S

Address: 6991 E. CAMELBACK RD STE B-310

City-St-Zip: SCOTTSDALE, AZ 65251

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Date

Title: DPT (X) Change ( ) Addition

Name: NAPP, DAVID A

Address: 6991 E. CAMELBACK RD STE B-310

City-St-Zip: SCOTTSDALE, AZ 85251

Title: VT (X) Change ( ) Addition

Name: EDWARDS, COLLEN S

Address: 6991 E. CAMELBACK RD STE B-310

City-St-Zip: SCOTTSDALE, AZ 85251

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DAVID A NAPP DPT 04/26/2007