

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

DOCUMENT # F92000000019 (1)

1. Corporation Name

SQUIRES HAVEN, INC.

SECRETARY - 1 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business

POST OFFICE BOX 604155
CLEVELAND OH 44105
US

Mailing Address

POST OFFICE BOX 604155
CLEVELAND OH 44104
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
10/28/1992

3a. Date of Last Report
05/01/1994

4. FEI Number
34-1698015

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. 100.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CT CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when terminating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

CPT
SCOTT, WILLIAM H
3559 E 105TH
CLEVELAND OH

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DVP
WILLIAMS, LEWIS
3325 ERIN STREET
CLEVELAND OH 44113

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

DVP
SCOTT WILLIAM H
3559 E 105TH
CLEVELAND OH 44105

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

S
FOSTON, SHELLY R
3558 E. 105TH STREET
CLEVELAND OH 44105

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *William H. Scott Pres*

SIGNATURE AND TYPED OR PRINTED NAME OF OFFICER OR DIRECTOR

4-26-95 216 441-4107

Date

City/State/Zip

F92-19

MINUTES OF ANNUAL DIRECTOR'S MEETING

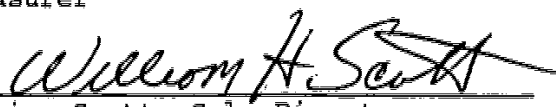
SQUIRES HAVEN, INC.

JUNE, 1994

The undersigned, who are all of the directors of Squires Haven, Inc. hereby waive notice of and consent to a directors meeting held on June , 1994, at the principal office located at Cleveland, Ohio. The following are the minutes of said meeting and consent to the following actions:

1. That the officers of Squires Haven, Inc. shall be re-elected to an additional three-year term as follows:

William Scott, President
William Scott, Vice-President
Shelley Ray Foston, Secretary
William Scott, Treasurer



William Scott, Sole Director

F92-19

RESIGNATION

I, LEWIS WILLIAMS, hereby resign as a director and vice-president of Squires Haven, Inc.

Lewis Williams
LEWIS WILLIAMS

DATE

6-10-94