

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000019149

FILED
Apr 27, 2007
Secretary of State

Entity Name: SAFE HAVEN AVIAN PLACEMENT SERVICE, LLC

Current Principal Place of Business:

P.O. BOX 7127
HUDSON, FL 34674 US

New Principal Place of Business:

10122 MAY DRIVE
HUDSON, FL 34669 US

Current Mailing Address:

P.O. BOX 7127
HUDSON, FL 34674 US

New Mailing Address:

FEI Number: 56-2362285 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

MOORE, CHRISTINE M
1445 WINDMOOR DRIVE
DUNEDIN, FL 34698 US

Name and Address of New Registered Agent:

MOORE, CHRISTINE M
10122 MAY DRIVE
HUDSON, FL 34669 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: CHRISTINE H. MOORE

04/27/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: MOORE, CHRISTINE M
Address: P.O. BOX 7127
City-St-Zip: HUDSON, FL 34674 US

Title: MGR () Delete
Name: HOSNER, DENISE H
Address: 2008 OLD OAK LANE
City-St-Zip: SAFETY HARBOR, FL 34695 US

ADDITIONS/CHANGES:

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: CHRISTINE MOORE

PRES

04/27/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date