

# **2012 LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L11000096631

**FILED**  
**May 01, 2012**  
**Secretary of State**

**Entity Name:** HAVEN OF ANGELS L.L.C.

**Current Principal Place of Business:**

1720 W. FAIRFIELD DR, STE. 309  
PENSACOLA, FL 32505

**New Principal Place of Business:**

1720 W. FAIRFIELD DR, STE. 309  
PENSACOLA, FL 32501

**Current Mailing Address:**

1720 W. FAIRFIELD DR, STE. 309  
PENSACOLA, FL 32505

**New Mailing Address:**

1720 W. FAIRFIELD DR, STE. 309  
PENSACOLA, FL 32501

**FEI Number:** 45-3004045

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

PUGH, MYRTLE  
1305 WEST LEE ST.  
PENSACOLA, FL 32501 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

**MANAGING MEMBERS/MANAGERS:**

**Title:** MGR  
**Name:** PUGH, MYRTLE  
**Address:** 1261 CHEYENNE CIR  
**City-St-Zip:** PENSACOLA, FL 32505

I hereby 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:** MYRTLE PUGH

MGR

05/01/2012

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