

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000000461

FILED
Feb 15, 2010
Secretary of State

Entity Name: HAVEN OF OUR LADY OF PEACE, INC.

Current Principal Place of Business:

1900 SUMMIT BLVD.
PENSACOLA, FL 32503

New Principal Place of Business:

Current Mailing Address:

5151 NORTH 9TH AVE.
PENSACOLA, FL 325132700

New Mailing Address:

FEI Number: 59-3620346

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

EMMANUEL, KAREN O
5151 NORTH 9TH AVE.
SACRED HEART HEALTH SYSTEM, INC.
PENSACOLA, FL 32504 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

OFFICERS AND DIRECTORS:

Title: CD
Name: ELMORE, BUDDY
Address: 5151 NORTH NINTH AVENUE
City-St-Zip: PENSACOLA, FL 32504

Title: ST
Name: EMMANUEL, KAREN O
Address: 5151 NORTH 9TH AVE.
City-St-Zip: PENSACOLA, FL 32504

Title: VC
Name: TOMLIN, CHRISTOPHER
Address: 1520 COOPER HILL RD.
City-St-Zip: BIRMINGHAM, AL 35210

Title: D
Name: ROBERTS, HENRY E DR
Address: 5151 NORTH NINTH AVENUE
City-St-Zip: PENSACOLA, FL 32504

Title: D
Name: FETTERMAN, NANCY
Address: 24 LAKESIDE DR EMERALD POINT
City-St-Zip: PENSACOLA, FL 32507

Title: D
Name: VINSON, ELLEN
Address: 1905 EAST STRONG ST
City-St-Zip: PENSACOLA, FL 32501

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: BUDDY ELMORE

C

02/15/2010

Electronic Signature of Signing Officer or Director

Date