# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Jul 18, 2004**
**Secretary of State**

DOCUMENT# N01000004054

**Entity Name:** HAVEN OF REST HOPE MINISTRY, INC.

**Current Principal Place of Business:**

2805 TAMMARRON LANE
BRANDON, FL 33511

**New Principal Place of Business:**

**Current Mailing Address:**

2805 TAMMARRON LANE
BRANDON, FL 33511

**New Mailing Address:**

**FEI Number:** **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

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

VANDIVER, CRAIG SR.
2805 TAMMARRON LANE
BRANDON, FL 33511 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: | P | ( ) Delete |
| Name: | VANDIVER, CRAIG SR. | |
| Address: | 2805 TAMMARRON LANE | |
| City-St-Zip: | BRANDON, FL 33511 | |
| Title: | V | ( ) Delete |
| Name: | VANDIVER, PAMELA L | |
| Address: | 2805 TAMMARRON LANE | |
| City-St-Zip: | BRANDON, FL 33511 | |
| Title: | DIR | ( ) Delete |
| Name: | VANDIVER, ELWOOD | |
| Address: | 750 OLD 71 | |
| City-St-Zip: | CHARLEROI, PA 16063 US | |
| Title: | DIR | ( ) Delete |
| Name: | VANDIVER, PATRICK | |
| Address: | 40 PINEBROOK TERR #6 | |
| City-St-Zip: | BRISTOL, CT 06010 | |
| Title: | DIR | ( ) Delete |
| Name: | VANDIVER, CRYSTAL | |
| Address: | 4020 FONTANA PL | |
| City-St-Zip: | VALRICO, FL 33594 | |
| Title: | DIR | ( ) Delete |
| Name: | VANDIVER, CRAIG JR | |
| Address: | 4020 FONTANA PL | |
| City-St-Zip: | VALRICO, FL 33594 | |

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

| | |
|---|---|
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| Title: | ( ) Change ( ) Addition |
| Name: | |
| Address: | |
| City-St-Zip: | |
| 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 for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CRAIG VANDIVER P 07/18/2004

Electronic Signature of Signing Officer or Director — Date