

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02997

FILED
Mar 09, 2010
Secretary of State

Entity Name: LAKE HAVEN ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5400 HUCKLEBERRY LAKE DR
SEBRING, FL 338713444 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 7183
SEBRING, FL 338720104 US

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:

MUIR, NIEL V
5312 ERIE DRIVE
SEBRING, FL 33875 US

Name and Address of New Registered Agent:

FOSTER, WILLIAM D
5326 N. HUCKLEBERRY LAKE DR.
SEBRING, FL 33875 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: WILLIAM D FOSTER

03/09/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: FOSTER, WILLIAM
Address: 5326 N. HUCKLEBERRY LAKE DR.
City-St-Zip: SEBRING, FL 33875

Title: T
Name: VINEYARD, DONALD M
Address: 1605 DOZIER AVE
City-St-Zip: SEBRING, FL 33875

Title: D
Name: JOHNSON, ROBBIE
Address: 4247 HIGSON AVE
City-St-Zip: SEBRING, FL 33875

Title: S
Name: MUIR, CAROLE
Address: 5312 ERIE DR.
City-St-Zip: SEBRING, FL 33875

Title: D
Name: MUIR, NIEL
Address: 5312 ERIE DR..
City-St-Zip: SEBRING, FL 33875

Title: D
Name: BAILEY, LORETTA
Address: 411 SPORTSMAN AVE
City-St-Zip: SEBRING, FL 33875

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: WILLIAM D FOSTER

P

03/09/2010

Electronic Signature of Signing Officer or Director

Date