2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2009
Secretary of State

DOCUMENT# N03000006700

Entity Name: LEBEN'S HAVEN, INC.

Current Principal Place of Business:

1401 VILLAGE BLVD.
#1713
WEST PALM BEACH, FL 33409 US

New Principal Place of Business:

1333 PARKWAY CT.
GREENACRES, FL 33413 US

Current Mailing Address:

1401 VILLAGE BLVD.
#1713
WEST PALM BEACH, FL 33409 US

New Mailing Address:

1333 PARKWAY CT.
GREENACRES, FL 33413 US

FEI Number: 03-0503786 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

MATHIS, MARY S
1401 VILLAGE BLVD.
1713
WEST PALM BEACH, FL 33409 US

Name and Address of New Registered Agent:

MATHIS, MARY S PRES
1333 PARKWAY CT.
GREENACRES, FL 33413 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: MARY S. MATHIS 05/01/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: VP ( ) Delete
Name: NANCY L. COWART
Address: 8509 WATER CAY
City-St-Zip: WEST PALM BEACH, FL 33411 US

Title: TREA ( ) Delete
Name: ELLA M. LEWIS
Address: 121 NW 27TH TERRACE
City-St-Zip: FT. LAUDERDALE, FL 33311 US

Title: SEC. ( ) Delete
Name: THELMA L. GARRISON
Address: 590 BELL ALLEY
City-St-Zip: CAIRO, GA 39828 US

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:

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 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: MARY S. MATHIS PRES 05/01/2009
Electronic Signature of Signing Officer or Director Date