

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

03-3T-2008 90033.033 61.00
N03000007837

FILED

2008 APR 11 AM 8:25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



1st MOORE CR2E037 (10/07)

DOCUMENT # N03000007837					
1. Entity Name RAVEN'S PLACE, INC.					
Principal Place of Business 7324 WILLOW SPRINGS CIRCLE W. BOYNTON BEACH FL 33436			Mailing Address 7324 WILLOW SPRINGS CIRCLE W. BOYNTON BEACH FL 33436		
2. Principal Place of Business - No P.O. Box #			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 52-2405851	
				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent JOSEY, SHIRLEY A 7324 WILLOW SPRINGS CIRCLE WEST LANTANA FL 33436			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <i>Shirley Josey</i> (NOTE: Signature of person filing this report is required.) DATE 3-12-08					
FILE NOW FEE IS \$61.25 Due By May 17, 2008		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P JOSEY, SHIRLEY A 7324 WILLOW SPRINGS CIRCLE WEST LANTANA FL 33462	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ROLLE, PENNY A 7324 WILLOW SPRINGS CIRCLE WEST LANTANA FL 33462	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ROLLE, WARREN J 7324 WILLOW SPRINGS CIRCLE WEST LANTANA FL 33462	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Shirley Josey</i>			DATE: 3-12-08		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			DATE		

4/15/08