

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000009781

FILED
Jul 07, 2006
Secretary of State

Entity Name: EASY HAVEN GROUP HOME, INC.

Current Principal Place of Business:

519 CLARK STREET
EATONVILLE, FL 32751

New Principal Place of Business:

515 CLARK STREET
EATONVILLE, FL 32751

Current Mailing Address:

519 CLARK STREET
EATONVILLE, FL 32751

New Mailing Address:

515 CLARK STREET
EATONVILLE, FL 32751

FEI Number: 59-3745364 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:

TAYLOR, CLIFFORD
600 LIME ST.
EATONVILLE, FL 32751 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: CP () Delete
Name: SEALEY, FRANCES P
Address: 309 CLARK STREET, BOX 2155
City-St-Zip: EATONVILLE, FL 32751

Title: DT () Delete
Name: TAYLOR, IDELLA
Address: 515 CLARK STREET #1
City-St-Zip: EATONVILLE, FL 32751

Title: DS () Delete
Name: HARRIS, JACQUE F
Address: 317 TEAKWOOD LANE
City-St-Zip: ALTAMONTE SPRINGS, FL 32751

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CP (X) Change () Addition
Name: SEALEY, FRANCES P
Address: 309 CLARK STREET, P. O. BOX 2155
City-St-Zip: EATONVILLE, FL 32751

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 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: FRANCES P. SEALEY

CP

07/07/2006

Electronic Signature of Signing Officer or Director

Date