

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N04809 (2)
1. Corporation Name

THE MIRACLE HAVEN ADULT CONGREGATE LIVING FACILI
LTY, INC.



Principal Place of Business

4882 OLD ST. AUGUSTINE RD.
TALLAHASSEE FL 32311-9344

Mailing Address

4882 OLD ST. AUGUSTINE RD.
TALLAHASSEE FL 32311-9344

3. Date Incorporated or Qualified
08/22/1984

3a. Date of Last Report
05/01/1995

4. FEI Number
59-2509279

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

HENDERSON, JOHN A, SR
1540 RAINBOW RD.
TALLAHASSEE FL 32304

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12. OFFICERS AND DIRECTORS

TITLE PP ☐ DELETE

NAME HENDERSON, JOHN A
STREET ADDRESS 1540 RAINBOW RD.
CITY-ST-ZIP TALLAHASSEE FL 32310

TITLE D ☐ DELETE

NAME HENDERSON, JACOB B
STREET ADDRESS 4012 BUSTER RD.
CITY-ST-ZIP TALLAHASSEE FL 32310

TITLE D ☐ DELETE

NAME HENDERSON, JERRY R
STREET ADDRESS 4882 OLD ST AUGUSTINE RD
CITY-ST-ZIP TALLAHASSEE FL

TITLE D ☐ DELETE

NAME HENDERSON, JEFFREY R
STREET ADDRESS 4015 BUSTER RD.
CITY-ST-ZIP TALLAHASSEE FL 32310

TITLE D ☐ DELETE

NAME BLAKE, SYLVIA H.
STREET ADDRESS 4011 BISHOP ROAD
CITY-ST-ZIP TALLAHASSEE FL 32310

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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☐ Change ☐ Addition

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

0027901

CR2E037 (12/95)