

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

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FILED
Mar 04, 2011
Secretary of State

Entity Name: THE HAVEN DROP-IN CENTER, INC.

Current Principal Place of Business:

630-A WOODBURY DR.
PORT CHARLOTTE, FL 33954

New Principal Place of Business:

Current Mailing Address:

630-A WOODBURY DR.
PORT CHARLOTTE, FL 33954

New Mailing Address:

FEI Number: 65-1289084

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ROMILLO, ANA M MS.
2120 LUCKY ST.
PORT CHARLOTTE, FL 33948 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: P/D
Name: LOEWE, ANN
Address: 4393 DURANT STREET
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: D
Name: COUSINS, FLORINE
Address: 17212 CAPE HORN BLVD.
City-St-Zip: PUNTA GORDA, FL 33955

Title: D
Name: RAMKISSOON, OZ PASTOR
Address: 390 FLAMINGO BLVD
City-St-Zip: PORT CHARLOTTE, FL 33954

Title: D
Name: KAISER, SANDRA
Address: 3800 LAKE BAYSHORE DRIVE #104
City-St-Zip: BRADENTON, FL 34205

Title: S/D
Name: MAGNON, JUDY
Address: 2208 CASTILLO AVE.
City-St-Zip: PUNTA GORDA, FL 33950

Title: TD
Name: ROMILLO, ANA M
Address: 2120 LUCKY STREET
City-St-Zip: PORT CHARLOTTE, FL 33948

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: ANA M. ROMILLO

T/D

03/04/2011

Electronic Signature of Signing Officer or Director

Date