

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000008663

FILED
Mar 09, 2011
Secretary of State

Entity Name: AMLCRESTHAVEN UNIT #339 INC.

Current Principal Place of Business:

70103 NALCREST ROAD
NALCREST, FL 338566306

New Principal Place of Business:

Current Mailing Address:

PO BOX 6306
NALCREST, FL 338566306

New Mailing Address:

FEI Number: 31-0953125

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAY, BARBARA K
5101 NALCREST ROAD
NALCREST, FL 338566427 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: PD
Name: SCHWARTING, PHYLLIS
Address: 5104 NALCREST RD.
City-St-Zip: NALCREST, FL 33856

Title: VPD
Name: FINNEGAN, PATRICIA
Address: 51109 NALCREST RD.
City-St-Zip: NALCREST, FL 33856

Title: SD
Name: DAVIDSON, LINDA
Address: 56101 NALCREST RD.
City-St-Zip: NALCREST, FL 33856

Title: TD
Name: HAY, BARBARA
Address: 5101 NALCREST RD
City-St-Zip: NALCREST, FL 33856

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: BARBARA K HAY

TD

03/09/2011

Electronic Signature of Signing Officer or Director

Date