2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000001761

Entity Name: HAVEN OF REST INC.

FILED Jan 25, 2012 Secretary of State

Current Principal Place of Business:

New Principal Place of Business:

32801 N. 441, LOT 244 OKEECHOBEE, FL 34972

Current Mailing Address:

New Mailing Address:

32801 N. 441, LOT 244 OKEECHOBEE, FL 34972

FEI Number: 56-2447456

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

VELIE, TOM 32801 N. 441, LOT 244 OKEECHOBEE, FL 34972 US

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:

Γitle: PP

Name: VELIE, TOM

Address: 32801 N. 441, LOT 244
City-St-Zip: OKEECHOBEE, FL 34972

Title: VP

 Name:
 VELIE, RACHEL

 Address:
 32801 N. 441, LOT 244

 City-St-Zip:
 OKEECHOBEE, FL 34972

Title: AT

 Name:
 VELIE, JOSHUA

 Address:
 32801 N. 441, LOT 244

 City-St-Zip:
 OKEECHOBEE, FL 34972

Title:

Name: GIBSON, TAMMY Address: 715 NW 106 ST

City-St-Zip: OKEECHOBEE, FL 34972

Title: 5

Name: HATFIELD, PAM Address: 966 NE 361 CT.

City-St-Zip: OKEECHOBEE, FL 34972

Title: AS

 Name:
 VELIE, GABRIELLE

 Address:
 32801 N. 441, LOT 244

 City-St-Zip:
 OKEECHOBEE, FL 34972

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: TAMMY GIBSON T 01/25/2012