2001 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # N47142 1. Entity Name SHADY HAVEN ASSOCIATION, INC. Principal Place of Business Mailing Address 333 SOUTH TAMIAMI TR 150 OLD ENGLEWOOD RD SUITE 199 VENICE FL 34285 **ENGLEWOOD FL 34223**

FILED Apr 24, 2001 8:00 am Secretary of State 04-24-2001 90022 048 ****61.25

US US					I KERIKIRI DIL AIRIL IRRU KIDIK BILAKO IKUI RIDIL DILAKI RIDIL BIRIL BIRIL BIRIK BIRIK BIRIK BIRIK 1886				
2. Principal Place of Business		3. Mailing Address						{ 	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE	IN THIS SF	'ACE		
City & State		City & State		4. FEI Num	4. FEI Number 65-0394069		Applied For Not Applicable		
Zip	Country	Zip	Country	5. Certifica	ite of Status Desired		8.75 Addi ee Required		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent					
			Name	Name					
KORP, WILLIAM R. 333 SOUTH TAMIAMI TRAIL SUITE 199				Street Address (P.O. Box Number is Not Acceptable)					
VENICE FI			City		. 1	FL	Zip Code		
8. 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.									
8. The above	named entity submits this statement for	trie purpose or changing its n	agistered office o	registered agent, or t	John, in the state of Fiolic	u.			
SIGNATURE									
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
	FILE NOW: FEE IS \$61.25	9. Election Campaign F Trust Fund Contribut	\$5.00 May Be Added to Fees		Check Pa	ayable to of State			
10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10								10	
10.	PD OFFICERS AND DIN	Delete	TITLE	P.D.	777777		Change	Addition	
TITLE NAME	BATTISTA, RICHARD	IEI ∩eiere	NAME	BATTISTA	LICHARD	•			
STREET ADDRESS	150 OLD ENGLEWOOD RD		STREET ADDRESS	150 OLD ENG	LEWOOD RD			[]	
CITY-ST-ZIP	ENGLEWOOD FL 34223		CITY-ST-ZIP	ENGLEMOOR	FL34273			į	
TITLE	VPD	Delete	TITLE	UPP			☐ Change	Addition &	
NAME	BARRIER, GEORGE		NAME	BERRIER	GEORGE				
STREET ADDRESS	150 OLD WNGLEWOOD RD		STREET ADDRESS	150 OLD EN	GLEWOOD KD				
CITY-ST-ZIP	ENGLEWOOD FL 34223		CITY-ST-ZIP	ENGLEMOD	D FL 3422				
TITLE NAME	SD Battista, marguerite a	Delete	TITLE NAME	SD	MARGUERITE, A	\ \ \	Change	Addition	
STREET ADDRESS*	-150 OLD ENGLEWOOD ROAD		_ STREET ADDRESS_	ISO DEDIENS	LEWOOD RO				
CITY-ST-ZIP	ENGLEWOOD FL 34223		CITY-ST-ZIP	ENGLEMOOR	FL 34223	3	- •		
TITLE	D	Delete	TITLE	3			Change	Addition	
NAME	PACK, VIRGIL ~		NAME	WILKINSON	ARTHUR 25				
STREET ADDRESS	150 OLD ENGLEWOOD ROAD		STREET ADDRESS		varencos es				
CITY-ST-ZIP	ENGLEWOOD FL		CITY-ST-ZIP		09 .FL 3422				
TITLE	D	Delete	TITLÉ	TICKLE 5	TANLEY	1	Change	☐ Addition	
NAME	SCHLOSSER, BEVERLY		NAME	120 ord en	GLEWOOD RD			1	
STREET ADDRESS CITY-ST-ZIP	150 OLD ENGLEWOOD ROAD ENGLEWOOD FL		STREET ADDRESS CITY-ST-ZIP	Exeremoo	o FL 34223				
TITLE	TD	Delete	TITLE	P		<u> </u>	Change	Addition	
NAME	WILKINSON, ARTHUR		NAME	SCHLOSSER	BEVEKLY		•		
STREET ADDRESS	150 OLD ENGLEWOOD ROAD		STREET ADDRESS	150 0LD EN	glewood RD				
CITY-ST-ZIP	ENGLEWOOD FL		CITY-ST-ZIP	EV 9LEWO	00 FL 342	23			

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

GH APPLIL 2001

941-460-94-02