

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47482

FILED
Apr 20, 2009
Secretary of State

Entity Name: FAIRHAVEN SOUTH, INC.

Current Principal Place of Business:

751 W CAREY LANE
AVON PARK, FL 33825 US

New Principal Place of Business:

1010 US 27 N
AVON PARK, FL 33825 US

Current Mailing Address:

1042 N BRAINERD AVE.
AVON PARK, FL 33825 US

New Mailing Address:

238 NAUTILUS WAY
TREASURE ISLAND, FL 33706 US

FEI Number: 65-0339453

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CRIST, LELAND
683 WESLEY CIRCLE
AVON PARK, FL 33825 US

Name and Address of New Registered Agent:

CRIST, LELAND
238 NAUTILUS WAY
TREASURE ISLAND, FL 33706 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:

04/20/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: LUCE, BURT
Address: 2408 SUNRISE KEY BLVD
City-St-Zip: FT LAUDERDALE, FL 33304

Title: CD () Delete
Name: PEED, BOBBY R
Address: 600 PINE AVENUE
City-St-Zip: BUTLER, GA 31006

Title: PD () Delete
Name: HARRIMAN, HUBERT
Address: 808 W. 4TH STREET
City-St-Zip: MARION, IN 46952

Title: VD () Delete
Name: GRAY, SANDRA
Address: 8 OLDE VILLAGE DR
City-St-Zip: NICHOLASVILLE, KY 40356

Title: SD () Delete
Name: MCCOLLUM, SHELLY
Address: 3783 STATE ROAD 18 EAST
City-St-Zip: MARION, IN 46952

Title: TD () Delete
Name: LINDVALL, BRENT
Address: 3783 STATE ROAD 18 EAST
City-St-Zip: MARION, IN 46952

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JONES, JERRY DR.
Address: 630 COUNTY ROAD 198
City-St-Zip: NACOGDOCHES, TX 75965

Title: CD (X) Change () Addition
Name: PEED, BOBBY R MR.
Address: 600 PINE AVENUE
City-St-Zip: BUTLER, GA 31006

Title: PD (X) Change () Addition
Name: HARRIMAN, HUBERT DR
Address: 808 W. 4TH STREET
City-St-Zip: MARION, IN 46952

Title: VD (X) Change () Addition
Name: GRAY, SANDRA DR.
Address: 8 OLDE VILLAGE DR
City-St-Zip: NICHOLASVILLE, KY 40356

Title: SD (X) Change () Addition
Name: MCCOLLUM, SHELLY MRS.
Address: 3783 STATE ROAD 18 EAST
City-St-Zip: MARION, IN 46952

Title: TD (X) Change () Addition
Name: LINDVALL, BRENT MR.
Address: 3783 STATE ROAD 18 EAST
City-St-Zip: MARION, IN 46952

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SHELLY MCCOLLUM

S

04/20/2009

Electronic Signature of Signing Officer or Director

Date