

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

CORPORATION
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED

02 JUL 22 PM 3:46

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N51026

1. Corporation Name

HAVEN South, Inc.

2. Principal Office Address

4600 TOUCHTON RD

3. Mailing Office Address

7260 ARLET DR

Suite, Apt. #, etc.

Bldg 100 STE 150

Suite, Apt. #, etc.

City & State

JACKSONVILLE

City & State

JACKSONVILLE

Zip

32246

Country

DUVAL

Zip

32211

Country

DUVAL

4. Date Incorporated or Qualified
To Do Business in Florida

Sept 23, 1992

5. FEI Number

65-0367881

Applied For -

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

HARRY MYERS

900006706969 -- 1

Street Address (P.O. Box Number is Not Acceptable)

7260 ARLET DR

07/26/02 01044-004
****122.50 **** 22.50

Suite, Apt. #, Etc.

City

JACKSONVILLE

State

FL

Zip Code

32211

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of
Registered Agent

HARRY MYERS

REGISTERED AGENT MUST SIGN

Date July 18, 2002

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PDS	HARRY MYERS	7260 ARLET DR	JACKSONVILLE, FL 32211
VPD	SANDRA CLAYBORN	6921 ENVIRON #LP	LAUDERHILL, FL 33319
TD	HENRY MYERS	2375 NW 26 AVE	FT. LAUD. FL 33311

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

HARRY MYERS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HARRY MYERS 7/18/02 (904) 722-9821

Date

Daytime Phone #

CR2E081 (8/01)