


DOCUMENT # N94000003527			
1. Entity Name BIT O' HEAVEN PARK, INC.			
Principal Place of Business 73 E. BRADLEY ST. #12 MIRAMAR BEACH, FL 32550 US		Mailing Address 73 E. BRADLEY ST. #12 MIRAMAR BEACH, FL 32550 US	
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. City & State ZipCountry		3. Mailing Address Suite, Apt. #, etc. City & State ZipCountry	
6. Name and Address of Current Registered Agent			
GREEN, WILLIAM H 22 EAST BALDWIN AVE. DEFUNIAK SPRINGS, FL 32433			Name
			Street Address
			City
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required)</small>			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D BARBARA, IVES 507 EAST LAKE DRIVE QUITMAN, GA 31643 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D O'NEAL, PAT 1709-A GORNTON RD.#301 VALDOSTA, GA 31601 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P MAURER, EARL 1051- M33 N COMINS, MI 48619 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD IVES, KIM 507 EAST LAKE DRIVE QUITMAN, GA 31643 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S MORSE SR., JAMES R PO BOX 1406 MONTAGUE, NJ 07827 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P.O. Mo
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T DEBRUYN, REVA 73 EAST BRADLEY STREET, LOT #6 MIRAMAR BEACH, FL 32550 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained indicated on this report or supplemental report is true and accurate and that my signature shall have the of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 61 changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>James R. Morse Sr.</i> James R. Morse <i>Secretary</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			