

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003527

FILED  
Jan 23, 2009  
Secretary of State

Entity Name: BIT O' HEAVEN PARK, INC.

## Current Principal Place of Business:

73 E. BRADLEY ST.  
#12  
MIRAMAR BEACH, FL 32550 US

## New Principal Place of Business:

## Current Mailing Address:

73 E. BRADLEY ST.  
#12  
MIRAMAR BEACH, FL 32550 US

## New Mailing Address:

FEI Number: 59-3260087      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GREEN, WILLIAM H  
22 EAST BALDWIN AVE.  
DEFUNIAK SPRINGS, FL 32433 US

## Name and Address of New Registered Agent:

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:

Title: D ( ) Delete  
Name: BARBARA, IVES  
Address: 507 EAST LAKE DRIVE  
City-St-Zip: QUITMAN, GA 31643

Title: D ( ) Delete  
Name: O'NEAL, PAT  
Address: 1709-A GORNTON RD.#301  
City-St-Zip: VALDOSTA, GA 31601

Title: P ( ) Delete  
Name: MAURER, EARL  
Address: 1051- M33 N  
City-St-Zip: COMINS, MI 48619

Title: VD ( ) Delete  
Name: IVES, KIM  
Address: 507 EAST LAKE DRIVE  
City-St-Zip: QUITMAN, GA 31643

Title: S ( ) Delete  
Name: MORSE SR., JAMES R  
Address: PO BOX 915  
City-St-Zip: MONROEVILLE, NJ 08343

Title: T (X) Delete  
Name: DEBRUYN, REVA  
Address: 73 EAST BRADLEY STREET, LOT #6  
City-St-Zip: MIRAMAR BEACH, FL 32550

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PD (X) Change ( ) Addition  
Name: MAURER, EARL  
Address: 1051- M33 NORTH  
City-St-Zip: COMINS, MI 48619

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: STD (X) Change ( ) Addition  
Name: MORSE SR., JAMES R  
Address: PO BOX 915  
City-St-Zip: MONROEVILLE, NJ 08343

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: JAMES R. MORSE SR.

STD

01/23/2009

Electronic Signature of Signing Officer or Director

Date