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Apr 24 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N95000003245 (6)**

1. Corporation Name

GLENHAVEN ACADEMY, INC.

Principal Place of Business

Mailing Address

**7281 SUNSHINE GROVE ROAD
SUITE 129
BROOKSVILLE FL 34613
US**

**4431 LANDOVER BOULEVARD
SPRING HILL FL 34609**

3. Date Incorporated or Qualified

07/03/1995

4. FEI Number

59-3328210

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 12577 Spring Hill Dr.

26 4213 Mariner Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27 # 259

City, State

City, State

23 Spring Hill, FL

28 Spring Hill, FL

Zip

Zip

24 34609

29 34609

Country

Country

25 Hernando

30 Hernando

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**JOHNSON, NANCY
4431 LANDOVER BOULEVARD
SPRING HILL FL 34609**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE

NAME **JOHNSON, NANCY**
STREET ADDRESS **4431 LANDOVER BOULEVARD**
CITY-ST-ZIP **SPRING HILL FL 34609**

TITLE **D** ☐ DELETE

NAME **TEATES, JULIA**
STREET ADDRESS **12252 VERONA STREET**
CITY-ST-ZIP **SPRING HILL FL**

TITLE **P** ☐ DELETE

NAME **HUTCHINS, EDNA LAVERNE**
STREET ADDRESS **12285 PINE BLUFF STREET**
CITY-ST-ZIP **SPRING HILL FL**

TITLE **D** ☒ DELETE

NAME **CARRO, MICHAEL**
STREET ADDRESS **3923 PINE LIMBO COURT**
CITY-ST-ZIP **TAMPA FL**

TITLE **D** ☒ DELETE

NAME **MOORE, SUSAN**
STREET ADDRESS **3907 FLORAMAR TERRACE**
CITY-ST-ZIP **NEW PORT RICHEY FL**

TITLE **D** ☒ DELETE

NAME **GLISSON, JOANNA**
STREET ADDRESS **7153 SUNNYSIDE DR**
CITY-ST-ZIP **BROOKSVILLE FL**

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

D. Yvonne DeCoteau
16267-martha Rd
Brooksville, FL 34609
Darlene Franchi
10435 Tassel Street
Spring Hill, FL 34608

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]

3-26-98 352-683-3789

CR2E037 (10/97)