

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005481

FILED  
Jul 13, 2009  
Secretary of State

Entity Name: HAVEN OF REST MINISTRIES, INC.

**Current Principal Place of Business:**

550 HWY 80 WEST  
LABELLE, FL 33935 US

**New Principal Place of Business:**

461 6TH. AVE  
LABELLE, FL 33935 US

**Current Mailing Address:**

P. O. BOX 2821  
LABELLE, FL 33975

**New Mailing Address:**

FEI Number: 31-1639479      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

ELVER, RALPH  
461 S MAIN STREET  
LABELLE, FL 33935 US

**Name and Address of New Registered Agent:**

ELVER, RALPH  
301 HWY. 80 W.  
SUITE 201  
LABELLE, FL 33935 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: \_\_\_\_\_

Electronic Signature of Registered Agent

07/13/2009

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: TRASK, ALAN  
Address: P.O. BOX 2821  
City-St-Zip: LABELLE, FL 33975

Title: VPD ( ) Delete  
Name: TRASK, IRENE  
Address: P.O. BOX 2821  
City-St-Zip: LABELLE, FL 33975

Title: D ( ) Delete  
Name: PITTS, PAUL  
Address: 2401 COOLBROOK CT  
City-St-Zip: OVIEDO, FL 32766

Title: D ( ) Delete  
Name: BICKES, PAUL  
Address: 3493 SW SUNSET TRACE CIRCLE  
City-St-Zip: PALM CITY, FL 34990

Title: D ( ) Delete  
Name: MASON, HERMAN  
Address: 2921 MOUNT CARMEL ROAD  
City-St-Zip: HAMPTON, GA 302282018

Title: D ( ) Delete  
Name: POWELL, ELLIE  
Address: P.O. BOX 690609  
City-St-Zip: VERO BEACH, FL 32969

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

Title: D (X) Change ( ) Addition  
Name: MASON, HERMAN  
Address: P.O. BOX 122  
City-St-Zip: FAYETTEVILLE, GA 30214

Title: D (X) Change ( ) Addition  
Name: POWELL, ELLIE  
Address: 6169 SE GEORGETOWN PLACE  
City-St-Zip: HOBE SOUND, FL 33455

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: ALAN TRASK

Electronic Signature of Signing Officer or Director

PRES

07/13/2009

Date