2007 FOR PROFIT CORPORATION ANNUAL REPORT

Jul 13, 2007 08:00 AM DOCUMENT # P00000007706 **Secretary of State** 1. Entity Name OAK HAVEN RIVER RETREAT, INC. Principal Place of Business Mailing Address 12143 RIVERHILLS DR 12143 RIVERHILLS DR TAMPA, FL 33617 TAMPA, FL 33617 07062007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 59-3619251 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MINGLEDORFF, NEIL H JR DO NOT WRITE 12133 RIVERHILLS DRIVE TAMPA, FL 33617-1743 IN THIS SPACE 5. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE. Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOWIII FEE IS \$550.00 9. Election Campaign Financing \$5.00 May Be U00000768625 Trust Fund Contribution, Added to Fees Due by September 14, 2007 OFFICERS AND DIRECTORS 10. **PSTD** TITLE MINGLEDORFF, NEIL H JR. MARKE STREET ADDRESS 12133 RIVERHILLS DR CSTY-ST-ZIP TAMPA, FL 33617 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CRY-ST-ZIP TITLE NAME STREET ADDRESS Cary-ST-ZIP TITLE NAME STREET ADDRESS

FILED

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

SIGNATURE: Mingled Neil H. Mingledorff, Sr. 7/6/07 813-988-4580