

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 02, 2004 8:00 am
Secretary of State

08-02-2004 90009 048 ***150.00

DOCUMENT # P03000036753

1. Entity Name
GLADE HAVEN PARK, INC.



Principal Place of Business
**12484 EAST TERRY ST.
 BONITA SPRINGS, FL 34135**

Mailing Address
**12484 EAST TERRY ST.
 BONITA SPRINGS, FL 34135**

54066153



2. Principal Place of Business
12585 East Terry St.

3. Mailing Address
P.O. Box 8995

Suite, Apt. #, etc.

07082004 Chg-P CR2E034 (10/03)

City & State
Bonita Springs, FL

City & State
Naples, FL

Zip
34134

Country
USA

Zip
34101-8995

Country
USA

4. FEI Number
56-2359986

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

**ESKIN, HAROLD S
 1420 SE 47TH ST.
 CAPE CORAL, FL 33904**

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

8. 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
 Due by September 8, 2004**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	ATKINSON, KENNETH	
STREET ADDRESS	5419 TEAKWOOD DR.	
CITY - ST - ZIP	NAPLES, FL 34119	
TITLE	VD	<input type="checkbox"/> Delete
NAME	ATKINSON, JEAN	
STREET ADDRESS	5419 TEAKWOOD DR.	
CITY - ST - ZIP	NAPLES, FL 34119	
TITLE	ST	<input type="checkbox"/> Delete
NAME	BLAKE, CONSTANCE	
STREET ADDRESS	12484 E. TERRY ST.	
CITY - ST - ZIP	BONITA SPRING, FL	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS	12585 East Terry St.	
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

12. 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 report or supplemental 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 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.

SIGNATURE: *Sean Atkinson, Vice-Pres.* Date: 7/8/04 Daytime Phone #: (239) 354-4388

Sean Atkinson, Vice-Pres.