

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 30 1997 8:00am  
Secretary of State

DOCUMENT # P95000011388 (2)

1. Corporation Name  
HAVEN PROPERTIES, INC.

Principal Place of Business  
5560 BEE RIDGE ROAD STE. D2  
SARASOTA FL 34233

Mailing Address  
5560 BEE RIDGE ROAD STE. D2  
SARASOTA FL 34233-1507



3. Date Incorporated or Qualified 02/08/1995  
3a. Date of Last Report 04/30/1996

2. Principal Place of Business  
21 1000 N. Washington Blvd  
Suite, Apt. #, etc.  
22 City & State Sarasota FL  
23 Zip 34236 Country USA  
24 34236 25 USA  
26 1000 N. Washington Blvd  
Suite, Apt. #, etc.  
27 City & State Sarasota, FL  
28 Zip 34236 Country USA  
29 34236 30 USA

4. FEI Number 65-0554369  
Applied For Not Applicable  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

GRAHAM-SMITH, VIRGINIA L  
5560 BEE RIDGE ROAD STE. D2  
SARASOTA FL 34233

10. Name and Address of New Registered Agent

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 607.0502 and 607.1508, 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 607.0505, 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	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
P	GRAHAM-SMITH, VIRGINIA	5560 BEE RIDGE ROAD SUITE D-2	SARASOTA FL	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	12 NAME	13 STREET ADDRESS	14 CITY - ST - ZIP	Change	Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

14. I do 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Virginia Graham-Smith* VIRGINIA GRAHAM-SMITH 1888 3784010

CP2E034 (9/96)