

FILED
Aug 07, 2002 8:00 am
Secretary of State

08-07-2002 90173 009 ***150.00

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # **P98000048774**

1. Entity Name

SAFE HAVEN ESTATES, INC

DO NOT WRITE IN THIS SPACE

973092

2. Principal Place of Business

5 NO. BEST POINT

3. Mailing Address

5 NO BEST POINT

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

INVERNESS FL

City & State

INVERNESS FL

4. FEI Number

65-0894817

Applied For

Not Applicable

Zip

34450

Country

USA

Zip

34450

Country

USA

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

WALTER D. LUNDELINUS SR.

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

5 NO BEST POINT

City

INVERNESS

FL

Zip Code

34450

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☒

**January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25**

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
LUNDELINUS, SR. WALTER D.
5 NO. BEST POINT
INVERNESS FL 34450**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PD
OTTO HORST
5 NO. BEST POINT
INVERNESS FL 34450**

TITLE
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IN THIS SPACE**

13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Walter D. Lundelinus

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/1/02

Date

352 860264F

Daytime Phone #

CR2E034B (12/01)

Attachment

973092

SAFE HAVEN ESTATES, INC.
5 NO. BEST POINT
INVERNESS, FLORIDA 34450

August 1, 2002

To: Florida Department of State
Division of Corporations
Corporate Records
P.O. Box 6327
Tallahassee, FL 32314

Subject: Safe Haven Estates, Inc.
Ref: # P98000048774 - UBR 2002

Enclosed please find the 2002 UBR Report plus a check in the amount of \$150.00 for the above referenced Corporation.

In going through our records we discovered that the UBR renewal form for the year 2002 had never been received due to an address change from 9946 N.W. 49th Terrace, Miami, FL 33178. It appears that the Postal Service failed to forward the form to our new address of, 5 North Best Point, Inverness, FL 34450.

Since the change of address was the reason the report had never been filed, we are asking you to abate the required penalties, and accept the enclosed check for the current years filing.

Thank you for giving this request your immediate and positive response.

Sincerely,



Walter D. Lundelius, Sr
Registered Agent, Safe Haven Estates, Inc.