

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P99000107157

Entity Name: GATOR HAVEN, INC.

FILED
Apr 27, 2009
Secretary of State

Current Principal Place of Business:

5330 66TH ST NORTH
ST PETERSBURG, FL 33709

New Principal Place of Business:

5660 66TH ST NORTH
ST PETERSBURG, FL 33709

Current Mailing Address:

5330 66TH ST NORTH
ST PETERSBURG, FL 33709

New Mailing Address:

5660 66TH ST NORTH
ST PETERSBURG, FL 33709

FEI Number: 59-3617599

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SLOAT, HAROLD
2790 PINELLAS POINT DR SOUTH
ST PETERSBURG, FL 33712 US

Name and Address of New Registered Agent:

FARREN, MICHELLE T
4410 25TH AVENUE N
ST PETERSBURG, FL 33713 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: MICHELLE FARREN

04/27/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SLOAT, HAROLD
Address: 135 BOCA CIEGA POINT BLVD. N
City-St-Zip: ST. PETERSBURG, FL 33708

Title: VP () Delete
Name: SLOAT, MARGARET C
Address: 135 BOCA CIEGA PT. N.
City-St-Zip: ST. PETERSBURG, FL 33708

Title: S () Delete
Name: FARREN, MICHELLE
Address: 4410 25TH AVE. N.
City-St-Zip: ST. PETERSBURG, FL 33708

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SLOAT, MARGARET C
Address: 135 BOCA CIEGA POINT BLVD. N
City-St-Zip: ST. PETERSBURG, FL 33708

Title: VP (X) Change () Addition
Name: SLOAT, HAROLD D
Address: 135 BOCA CIEGA POINT BLVD N
City-St-Zip: ST. PETERSBURG, FL 33708

Title: S (X) Change () Addition
Name: FARREN, MICHELLE T
Address: 4410 25TH AVENUE N
City-St-Zip: ST. PETERSBURG, FL 33713

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MICHELLE T FARREN

S

04/27/2009

Electronic Signature of Signing Officer or Director

Date