## 2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006729

Entity Name: SAFE HAVEN, INC.

ity Name. SAFE HAVEN, INC.

# **Current Principal Place of Business:**

257 N. CALDERWOOD ST BOX 334 ALCOA, TN 37701 FILED
Mar 04, 2015
Secretary of State
CC5620881592

## **Current Mailing Address:**

257 N. CALDERWOOD ST BOX 334 ALCOA, TN 37701 US

FEI Number: 59-3676159 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

JEFFREY, TURNER L 25 E. WRIGHT ST. STE 2511 PENSACOLA, FL 32501 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:

Electronic Signature of Registered Agent

Date

#### Officer/Director Detail:

Title PRES Title VF

NameMEAD, SUSANNameMCKENZIE, LALONNIEAddress425 WESTWOOD DR.Address125 CHANDLER WAYCity-State-Zip:MARYVILLE TN 37803City-State-Zip: LOUISVILLE TN 37777

Title SECRETARY/TREASURER Title DIRECTOR

NameSCOTT, TERRI DNameSTATH, JEFFREY DAddress625 BATTLE FRONT TRAILAddress425 WESTWOOD DR.City-State-Zip:KNOXVILLE TN 37934City-State-Zip:MARYVILLE TN 37803

SIGNATURE: SUSAN M. MEAD PRESIDENT 03/04/2015

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.