

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N16000004436

**Entity Name:** SAFE HAVEN OF GAINESVILLE, INC.**Current Principal Place of Business:**12066 SW COUNTY RD. 18  
HAMPTON, FL 32044**Current Mailing Address:**PO BOX 21  
GRAHAM, FL 32042 US**FEI Number: 81-2516648****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**VANSICKLE, GENEVIEVE M  
12066 SW COUNTY RD. 18  
HAMPTON, FL 32044 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	CEO
Name	VANSICKLE, GENEVIEVE M
Address	12066 SW COUNTY RD. 18
City-State-Zip:	HAMPTON FL 32044

Title	COO
Name	OWEN, CHARLES E
Address	12066 SW COUNTY RD. 18
City-State-Zip:	HAMPTON FL 32044

Title	OFFICER
Name	SHIRLEY, JUDY A
Address	PO BOX 21
City-State-Zip:	GRAHAM FL 32042

Title	OFFICER
Name	CHRISTENSEN, KERI PAPPAS
Address	PO BOX 21
City-State-Zip:	GRAHAM FL 32042

*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.*

**SIGNATURE: GENEVIEVE VANSICKLE****CEO****04/30/2021**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date