

2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20000007567

Entity Name: ANNIE'S HOUSE SAFE HAVEN, INC.

Current Principal Place of Business:

5245 CAMILLE AVENUE
JACKSONVILLE, FL 32210

Current Mailing Address:

5245 CAMILLE AVENUE
JACKSONVILLE, FL 32210 US

FEI Number: 85-1999985

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

RONES, KIMBERLY C
5245 CAMILLE AVENUE
JACKSONVILLE, FL 32210 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 RONES, KIMBERLY
Address 5245 CAMILLE AVENUE
City-State-Zip: JACKSONVILLE FL 32210

Title CFO
Name WILLIAMS, GLYNDA
Address 7061 OLD KINGS ROAD S #180
City-State-Zip: JACKSONVILLE FL 32217

Title S
Name SHACK, JASYMN
Address 10981 ACORN PARKE DRIVE E
City-State-Zip: JACKSONVILLE FL 32218

Title VP
Name ANDERSON, RICKY
Address 624 BLODGETTS LANE
City-State-Zip: JACKSONVILLE FL 32206

Title COO
Name HUGHES, MICHELLE
Address 4049 GRANT ROAD
City-State-Zip: JACKSONVILLE FL 32207

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: KIMBERLY D COSTNER-RONES

FOUNDER

01/16/2025

Electronic Signature of Signing Officer/Director Detail

Date