## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000006887

**Current Principal Place of Business:** 

Name and Address of Current Registered Agent:

() Delete

() Delete

INDIAN SHORES, FL 33785 US

403 N. HOWARD AVE.

403 N. HOWARD AVE.

403 N. HOWARD AVE.

TAMPA, FL 33606 US

in the State of Florida.

**OFFICERS AND DIRECTORS:** 

LUM, MARTIN

403 N. HOWARD AVE.

TAMPA, FL 33606

SMALL, JENNIFER

19211 GULF BLVD.

**Current Mailing Address:** 

TAMPA, FL 33606

TAMPA, FL 33606 FEI Number: 20-2594649

MARTIN, LUM

SIGNATURE:

200

200

200

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

FILED May 01, 2008 Secretary of State

Certificate of Status Desired ( )

US

05/01/2008

Date

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change ( ) Addition

() Change () Addition

**New Principal Place of Business:** 

INDIAN SHORES, FL 33785

INDIAN SHORES, FL 33785

INDIAN SHORES, FL 33785

LUM. MARTIN

19219 GULF BLVD.

INDIAN SHORES, FL 33785

Name and Address of New Registered Agent:

**New Mailing Address:** 

19219 GULF BLVD.

19219 GULF BLVD.

FEI Number Not Applicable ( )

MARTIN, LUM

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

19219 GULF BLVD.

Entity Name: HAVEN'S HIDEAWAY TOWNHOMES ASSOCIATION, INC.

FEI Number Applied For ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Electronic Signature of Registered Agent

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119

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

SIGNATURE: MARTIN LUM D 05/01/2008