

**2015 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F00000002482

**Entity Name:** C.W. HABER, INC.

**Current Principal Place of Business:**

17360 N. WHITEFISH PT. ROAD  
PARADISE, MI 49768

**Current Mailing Address:**

17360 N. WHITEFISH PT. ROAD  
PARADISE, MI 49768

**FEI Number: 38-3277784**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

WOOLEVER, CECILIA M  
19800 VETERANS BLVD.  
UNIT 14A  
PT. CHARLOTTE, FL 33954 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  
Name            WOOLEVER, CECILIA M  
Address        17360 N. WHITEFISH PT. RD  
City-State-Zip: PARADISE MI 49768

Title            VP  
Name            HABER, THOMAS  
Address        6400 TAYLOR RD, UNIT 7  
City-State-Zip: PUNTA GORDA FL 33950

Title            MEMB  
Name            RANSOM, WILLIAM  
Address        286 PARK ST. NW  
City-State-Zip: PT. CHARLOTTE FL 33952

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

**SIGNATURE: CECILIA WOOLEVER**

**PRESIDENT**

**01/10/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date