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: RAY SEYFERTH

Electronic Signature of Signing Officer/Director Detail

SIGNATURE: RAY SEYFERTH 02/08/2017 Date Electronic Signature of Registered Agent

#### Officer/Director Detail ·

Title	D	Title	VTD	
Name	NEWTON, HUNTER	Name	SEYFERTH, RAY	
Address	5156 WEST ROMEO LANE	Address	5156 WEST ROMEO LANE	
City-State-Zip:	DUNNELLON FL 34433	City-State-Zip:	DUNNELLON FL 34433	
Title	PSD			
Name	SEYFERTH, THELMA			
Address	5156 WEST ROMEO LANE			
City-State-Zip:	DUNNELLON FL 34433			

SEYFERTH, RAY 5156 W ROMEO LN DUNNELLON, FL 34433 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.

# **Current Mailing Address:**

5156 WEST ROMEO LANE

### Name and Address of Current Registered Agent:

### 2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

### DOCUMENT# N1500003555

Entity Name: FAIRHAVEN LEARNING PROJECT, INC.

#### **Current Principal Place of Business:**

5156 WEST ROMEO LANE DUNNELLON, FL 34433

DUNNELLON, FL 34433

#### FEI Number: 81-2229426

## Certificate of Status Desired: Yes

**REGISTERED AGENT** 

FILED Feb 08, 2017 Secretary of State CC2720758026

Date

02/08/2017