

SCC eFile

**2014 ANNUAL REPORT
COMMONWEALTH OF VIRGINIA
STATE CORPORATION COMMISSION**

214525704

1.) CORPORATION NAME:

The Haven, Inc.

DUE DATE: **5/31/2014**

2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:

**LESLIE E ALLEN III
1004 COURT ST
PO BOX 1198**

SCC ID NO: **05208319**

5.) STOCK INFORMATION

CLASS	AUTHORIZED
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LYNCHBURG, VA

3.) CITY OR COUNTY OF VA REGISTERED OFFICE:

LYNCHBURG CITY

4.) STATE OR COUNTRY OF INCORPORATION:

VA

6.) PRINCIPAL OFFICE ADDRESS:

ADDRESS: 201 FEDERAL STREET

CITY/ST/ZIP: LYNCHBURG, VA 24504

7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME:	L VINCENT SAWYER JR	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	PRESIDENT		
ADDRESS:	2209 RIDGEWOOD DRIVE		
CITY/ST/ZIP/CO:	LYNCHBURG, VA 24503		

NAME:	JAMES M MINEAR	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	201 KINGSTON DRIVE		
CITY/ST/ZIP/CO:	FOREST, VA 24551		

NAME:	JULIA H CRIM	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	1212 TWIN SPRINGS COURT		
CITY/ST/ZIP/CO:	FOREST, VA 24551		

NAME:	KATHERINE L CARPENTER	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	220 HUNTINGTON LANE		
CITY/ST/ZIP/CO:	BLACKSBURG, VA 24060		

NAME:	P G COSBY III	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	501 VES ROAD. APT C606		
CITY/ST/ZIP/CO:	LYNCHBURG, VA 24503		

NAME:	RHONDA M FORD	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
TITLE:	DIRECTOR		
ADDRESS:	17 LAMBETH COURT		
CITY/ST/ZIP/CO:	FISHERSVILLE, VA 22939		

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	DEBRA JEFFERSON DIRECTOR 156 NEWTON PLACE CONCORD, VA 24538	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	SANDY KANEHL DIRECTOR 333 BAYBERRY COVE FOREST, VA 24551	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JAMES KITCHEN TREASURER 308 MILL LANE ROAD LYNCHBURG, VA 24503	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	FRANCIS RAJ DIRECTOR 1003 WESTVIEW DRIVE LYNCHBURG, VA 24502	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	ALAN D WOMACK SR VICE PRESIDENT 168 OAK TRAIL LYNCHBURG, VA 24502	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KATHERINE A EPLEY SECRETARY 15 KIRKLEY CIRCLE FOREST, VA 24551	<input checked="" type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	GREG KELLEY DIRECTOR P O BOX 2458 LYNCHBURG, VA 24505	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	KIM MORRISON DIRECTOR 1394 WISECARVER ROAD RUSTBURG, VA 24588	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ L VINCENT SAWYER JR SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	L VINCENT SAWYER JR, PRESIDENT PRINTED NAME AND CORPORATE TITLE	5/17/2014 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			