FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JUN 19 AM 11:34

DOCUMENT # **N39341** **(5)**

1. Corporation Name

WEST ORANGE HABITAT FOR HUMANITY, INC.

Principal Place of Business	Mailing Address
% FIRST PRESBYTERIAN CHURCH P.O. BOX 38 OAKLAND FL 34760	% FIRST PRESBYTERIAN CHURCH P.O. BOX 38 OAKLAND FL 34760

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/27/1990
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-3046322 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

O'DONIEL-DAVIS, YVONNE A.
17517 DEER ISLE CIRCLE
KILLARNEY FL 34740

10. Name and Address of New Registered Agent

31 Name: John House
32 Street Address (P.O. Box Number is Not Acceptable): 17505 Sunset Terrace
33
34 City: Winter Garden FL 35 Zip Code: 34787

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: John House — 6/13/95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DV	1.1 TITLE	DTP	☑ Change ☐ Addition
NAME	HOUSE, JOHN	1.2 NAME	Same	
STREET ADDRESS	17505 SUNSET TERR	1.3 STREET ADDRESS	"	
CITY-ST-ZIP	WINTER GARDEN FL	1.4 CITY-ST-ZIP	Winter Garden FL 34787	
TITLE	DT	2.1 TITLE		☑ Change ☐ Addition
NAME	DAVIS, MARTIN	2.2 NAME		
STREET ADDRESS	17517 DEER ISLE CIR.	2.3 STREET ADDRESS	Delete	
CITY-ST-ZIP	KILLARNEY FL	2.4 CITY-ST-ZIP		
TITLE	DP	3.1 TITLE	D	☑ Change ☐ Addition
NAME	O'DONIEL-DAVIS, YVONNE	3.2 NAME	Same	
STREET ADDRESS	17517 DEER ISLE CIR.	3.3 STREET ADDRESS	"	
CITY-ST-ZIP	KILLARNEY FL	3.4 CITY-ST-ZIP	"	
TITLE	D	4.1 TITLE		☐ Change ☐ Addition
NAME	GEORGE, DILLARD	4.2 NAME		
STREET ADDRESS	6094 TARAWOOD DR	4.3 STREET ADDRESS		
CITY-ST-ZIP	ORLANDO FL	4.4 CITY-ST-ZIP		
TITLE	D	5.1 TITLE		☑ Change ☐ Addition
NAME	WINGATE, DON	5.2 NAME	Delete	
STREET ADDRESS	100 MERICAM CT.	5.3 STREET ADDRESS		
CITY-ST-ZIP	KILLARNEY FL	5.4 CITY-ST-ZIP		
TITLE	DS	6.1 TITLE		☑ Change ☐ Addition
NAME	STRICKLAND, CLAIRE	6.2 NAME	Delete	
STREET ADDRESS	5624 W LAKE BUTLER RD	6.3 STREET ADDRESS		
CITY-ST-ZIP	WINDERMERE FL	6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [signature] — 5/17/95 — 407-656-4779
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0073669