

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37687

Entity Name: PUTNAM HABITAT FOR HUMANITY, INC.**Current Principal Place of Business:**2506 CRILL AVENUE
PALATKA, FL 32177**Current Mailing Address:**P.O. BOX 2433
PALATKA, FL 32178-2433 US**FEI Number:** 59-3008349**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**JOHNSON, RAMICAH J
205 HIGGINS STREET
PALATKA, FL 32177 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:** RAMICAH JOHNSON

01/18/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title EXECUTIVE DIRECTOR
Name JOHNSON, RAMICAH J
Address 205 HIGGINS STREET
City-State-Zip: PALATKA FL 32177

Title SECRETARY
Name KELLY, LEO
Address PO BOX 1296
City-State-Zip: EAST PALATKA FL 32131

Title DIRECTOR
Name PARRISH, YVONNE
Address PO BOX 758
City-State-Zip: PALATKA FL 32178

Title PRESIDENT
Name FILLMAN, MARTIN
Address 337 HWY 17 N
City-State-Zip: PALATKA FL 32177

Title DIRECTOR
Name BOATWRIGHT, JOESPH JUDGE
Address POB 101
City-State-Zip: EAST PALATKA FL 32131

Title DIRECTOR
Name BENNETT, CAROLYN
Address 500 S. LONG AVENUE
City-State-Zip: INTERLACHEN FL 32148

Title TREASURER
Name MUIR, HELEN
Address 220 MADISON ST.
City-State-Zip: PALATKA FL 32177

Title DIRECTOR
Name HUGHES, CECILIA
Address P. O. BOX 2
City-State-Zip: HOLLISTER FL 32147

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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: RAMICAH JOHNSON

EXECUTIVE DIRECTOR

01/18/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name HOLT, TERRY
Address 207 BEECHER SPRINGS ROAD
City-State-Zip: POMONA PARK FL 32181

Title DIRECTOR
Name JANESK, KENNETH
Address 410 ST. JOHNS AVE
City-State-Zip: PALATKA FL 32177

Title DIRECTOR
Name ANDREW, LARSEN
Address 854 CR 310
City-State-Zip: INTERLACHEN FL 32148

Title DIRECTOR
Name BAKKER, BEVERLY
Address 307 TROPIC AVE.
City-State-Zip: INTERLACHEN FL 32148

Title VP
Name PARKER, CAROLINE
Address 116 KAREN CT
City-State-Zip: PALATKA FL 32177

Title DIRECTOR
Name SPEAKS, CHRISTINE
Address 1218 S. 13 ST.
City-State-Zip: PALATKA FL 32177

Title DIRECTOR
Name JOHNSON, PORTER
Address 1021 N 15TH ST,
City-State-Zip: PALATKA FL 32177