2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#737994

FILED Jan 20, 2005 Secretary of State

Entity Name: CLAY COUNTY HABITAT FOR HUMANITY, INC.

Current Principal Place of Business: New Principal Place of Business:

1707 BLANDING BOULEVARD MIDDLEBURG, FL 32068 US

Current Mailing Address: New Mailing Address:

P.O. BOX 240

ORANGE PARK, FL 320670240 US

FEI Number: 59-1748850 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HILL, KATHERINE ROLLEN, TERRY

2005 PALMETTO PT DR 732 WINFRED PLACE

PONTE VEDRA BEACH, FL 32082 US ORANGE PARK, FL 32073 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: TERRY ROLLEN 01/20/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD () Delete Title: PD (X) Change () Addition

 Name:
 ROLLEN, TERRY
 Name:
 ROLLEN, TERRY

 Address:
 732 WINFRED PLACE
 Address:
 732 WINFRED PLACE

 City-St-Zip:
 ORANGE PARK, FL 32073
 City-St-Zip:
 ORANGE PARK, FL 32073

Title: PD () Delete Title: VD (X) Change () Addition

 Name:
 HILL, KATHERINE
 Name:
 VANCAS, PHYLLIS

 Address:
 2005 PALMETTO PT. DRIVE
 Address:
 4120 ELDRIDGE AVE

 City-St-Zip:
 PONTE VEDRA BEACH, FL 32082
 City-St-Zip:
 ORANGE PARK, FL 32073

Title: SD () Delete Title: () Change () Addition

 Name:
 MELLAR, FAITH
 Name:

 Address:
 6771 SHINDLER DR
 Address:

 City-St-Zip:
 JACKSONVILLE, FL 32222
 City-St-Zip:

Title: AT () Delete Title: () Change () Addition

 Name:
 BOCCIERI, MONICA
 Name:

 Address:
 1921 ROSE MALLOW LANE
 Address:

 City-St-Zip:
 ORANGE PARK, FL 32003
 City-St-Zip:

Title: DT () Delete Title: () Change () Addition

 Name:
 HARRINGTON, TERESA B
 Name:

 Address:
 358 STILES AVENUE
 Address:

 City-St-Zip:
 ORANGE PARK, FL 32073
 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: TERRY ROLLEN PRES 01/20/2005