

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000004460

FILED  
May 15, 2006  
Secretary of State

**Entity Name:** ARCADIA-DESOTO COUNTY HABITAT FOR HUMANITY, INCORPORATED

**Current Principal Place of Business:**

107 W. OAK ST.  
209  
ARCADIA, FL 34266

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 1478  
ARCADIA, FL 34265

**New Mailing Address:**

**FEI Number:** 59-3656661 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

VITALI, ROBIN K  
6152 NE THOMAS DR.  
ARCADIA, FL 34266 US

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

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:

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: HESTMAN, EUGENE P  
Address: 5162 NW OAKHILL AVE  
City-St-Zip: ARCADIA, FL 34266

Title: DV ( ) Delete  
Name: GUICE, THELMA  
Address: 1601 E CYPRESS CST  
City-St-Zip: ARCADIA, FL 34266

Title: DS ( ) Delete  
Name: GREEN, JOY  
Address: P.O. BOX 2946  
City-St-Zip: ARCADIA, FL 342652946

Title: DT ( ) Delete  
Name: VITALI, ROBIN  
Address: 6152 NE THOMAS DR  
City-St-Zip: ARCADIA, FL 34266

Title: D (X) Delete  
Name: NAUMAN, KEN REV  
Address: 922 W HICKORY ST  
City-St-Zip: ARCADIA, FL 34266

Title: D (X) Delete  
Name: LLOYD, DIANE  
Address: 13 MICHIGAN AVE  
City-St-Zip: ARCADIA, FL 34266

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: HEITMAN, EUGENE P  
Address: 5162 NW OAKHILL AVE  
City-St-Zip: ARCADIA, FL 34266

Title: DV (X) Change ( ) Addition  
Name: PRIEST, CHARLES F  
Address: 1352 LAKE RD  
City-St-Zip: ARCADIA, FL 34266

Title: DS (X) Change ( ) Addition  
Name: SANDERS, MELISSA  
Address: 904 PARKVIEW  
City-St-Zip: ARCADIA, FL 342652946

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ROBIN K VITALI

DT

05/15/2006

Electronic Signature of Signing Officer or Director

Date