## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000009912

FILED Feb 17, 2006 Secretary of State

Entity Name: HABITAT FOR HUMANITY RESTORE, INC. **Current Principal Place of Business: New Principal Place of Business:** 3800 NW 22 AVENUE MIAMI, FL 33142 **Current Mailing Address: New Mailing Address:** P.O. BOX 420709 3800 NW 22 AVENUE MIAMI, FL 33242 MIAMI, FL 33142 FEI Number: 38-3672967 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: MANNING, ANNE 3800 NW 22 AVENUE MIAMI, FL 33142 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BYRNE, TOM Name: Name: Address: 3800 NW 22 AVENUE Address: City-St-Zip: MIAMI, FL 33142 City-St-Zip: Title: VPD ( ) Delete Title: () Change () Addition Name: SHINDELL, JAMES Name: Address: 200 S. BISCAYNE BLVD., #200 Address: City-St-Zip: MIAMI, FL 33131 City-St-Zip: Title: () Delete Title: () Change () Addition MANNING, ANNE E Name: Name: 3800 NW 22 AVENUE Address: Address: City-St-Zip: MIAMI, FL 33142 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: ANNE E. MANNING SEC 02/17/2006