## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000000603

FILED Apr 30, 2006 Secretary of State

Entity Name: HABITAT HOPE RESTORATION AND EDUCATION CENTER, INC.

**Current Principal Place of Business: New Principal Place of Business:** 212 W BLUE HERON BLVD WEST PALM BEACH, FL 33407 RIVIERA BEACH, FL 33404 **Current Mailing Address: New Mailing Address:** 725 45TH ST WEST PALM BEACH, FL 33407 FEI Number: 37-1457443 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: DORVILUS, LEMEL 14576 KEY LIME BLVD LOXAHATCHEE, FL 33470 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition DORVILUS, LEMEL Name: Name: 14576 KEYLIME BLVD. Address: Address: City-St-Zip: LOXAHATCHEE, FL 33470 City-St-Zip: Title: VD () Delete Title: (X) Change ( ) Addition AUDIGE, VICTOR Name: LAMARTINIERE, RENELLE Name: Address: 640 40TH ST. Address: 725 45TH STREET City-St-Zip: WEST PALM BEACH, FL 33407 City-St-Zip: WEST PALM BEACH, FL 33407 Title: () Delete Title: () Change () Addition WALKER, VERNALEE Name: Name: Address: 725 45TH ST. Address: City-St-Zip: WEST PALM BEACH, FL 33407 City-St-Zip: Title: ( ) Delete Title: VD (X) Change ( ) Addition Name: DAVILMAR, JEAN Name: DAVILMAR, JEAN 4595 CHERRY RD. 4595 CHERRY RD. Address: Address: City-St-Zip: WEST PALM BEACH, FL 33417 City-St-Zip: WEST PALM BEACH, FL 33417 Title: () Delete Title: () Change () Addition WASHINGTON, ERNEST Name: Name: 1124 BROADWAY STE O Address: Address: City-St-Zip: RIVIERA BEACH, FL 33404 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: LEMEL DORVILUS CEO 04/30/2006