

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005014

FILED
Apr 28, 2009
Secretary of State

Entity Name: HABITAT FOR HUMANITY OF SUWANNEE VALLEY, INC.

Current Principal Place of Business:

4410 SE 108TH LANE
BELLEVIEW, FL 34420

New Principal Place of Business:

Current Mailing Address:

4410 SE 108TH LANE
BELLEVIEW, FL 34420

New Mailing Address:

FEI Number: 75-3191070

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CARROLL, JUSTIN L JR
4410 SE 108TH LANE
BELLEVIEW, FL 34420 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: D () Delete
Name: PHILLIPS, LINDA A
Address: 9151 NE 68 ST
City-St-Zip: BRONSON, FL 32621

Title: D () Delete
Name: SMITH, CAROL ANN
Address: PO BOX 24
City-St-Zip: OTTER CREEK, FL 32683

Title: D () Delete
Name: CARROLL, PATRICIA
Address: 11310 SE 73RD COURT
City-St-Zip: BELLEVIEW, FL 34420

Title: D () Delete
Name: FIELDS, DANA
Address: 4551 SE SR 121
City-St-Zip: MORRISTON, FL 32668

Title: D () Delete
Name: GILBERT, WILL
Address: 5380 SW CR 332
City-St-Zip: TRENTON, FL 32693

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: JUSTIN L. CARROLL, JR.

TRSR

04/28/2009

Electronic Signature of Signing Officer or Director

Date