

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000001651

FILED  
Jan 16, 2008  
Secretary of State

Entity Name: HABITAT RESTORE, INC.

**Current Principal Place of Business:**

1225 SOUTH MILITARY TRAIL  
STE A  
WEST PALM BEACH, FL 33415

**New Principal Place of Business:**

**Current Mailing Address:**

1225 SOUTH MILITARY TRAIL  
STE A  
WEST PALM BEACH, FL 33415

**New Mailing Address:**

FEI Number: 20-4351103

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SABATELLO, MICHAEL J ESQ  
777 S FLAGLER DR SUITE 300E  
WEST PALM BEACH, FL 33401 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: PRES ( ) Delete  
Name: SABATELLO, MICHAEL J ESQ  
Address: 777 S FLAGLER DR SUITE 300E  
City-St-Zip: WEST PALM BEACH, FL 33401

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

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: PAULA PORTCH

D

01/16/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date