2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 12, 2009
Secretary of State

DOCUMENT# N13916

Entity Name: THE HABITAT HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

786 BLANDING BLVD.
SUITE 118
ORANGE PARK, FL 32065 US

New Principal Place of Business:

Current Mailing Address:

786 BLANDING BLVD.
SUITE 118
ORANGE PARK, FL 32065 US

New Mailing Address:

FEI Number: 59-2731569 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PERRY, ALAN
786 BLANDING BLVD
SUITE 118
ORANGE PARK, FL 32065 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: PD ( ) Delete
Name: RHOAD, CRAIG
Address: 1872 ONTARIO CT
City-St-Zip: MIDDLEBURG, FL 32068

Title: VP ( ) Delete
Name: BAILEY, MARY
Address: 1862 ALBERTA CT N
City-St-Zip: MIDDLEBURG, FL 32068

Title: S ( ) Delete
Name: MCPEEK, MARY ANN
Address: 1850 ALBERTA CT N
City-St-Zip: MIDDLEBURG, FL 32068

Title: AS ( ) Delete
Name: LAKE, LORI
Address: 1886 ALBERTA CT. S.
City-St-Zip: MIDDLEBURG, FL 32068

Title: T ( ) Delete
Name: LEA, JUDY
Address: 1845 ALBERTA CT N
City-St-Zip: MIDDLEBURG, FL 32068

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: STEPHENS, JOSEPH
Address: 1848 QUEBEC COURT
City-St-Zip: MIDDLEBURG, FL 32068

Title: D (X) Change ( ) Addition
Name: BAILEY, MARY
Address: 1862 ALBERTA CT N
City-St-Zip: MIDDLEBURG, FL 32068

Title: DS (X) Change ( ) Addition
Name: STOVER, MADALENA
Address: 1886 MACKENZIE CT
City-St-Zip: MIDDLEBURG, FL 32068

Title: DT (X) Change ( ) Addition
Name: WHISNER, RENEE
Address: 1846 MACKENZIE CT
City-St-Zip: MIDDLEBURG, FL 32068

Title: DV (X) Change ( ) Addition
Name: NOLAN, MICHAEL
Address: 1885 MACKENZIE CT S
City-St-Zip: MIDDLEBURG, FL 32068

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: ALAN PERRY RA 03/12/2009

Electronic Signature of Signing Officer or Director — Date