2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2005
Secretary of State

DOCUMENT# N14993

Entity Name: HABITAT FOR HUMANITY OF GREATER ORLANDO AREA, INC.

Current Principal Place of Business:

1925 TRAYLOR BLVD
ORLANDO, FL 32804 US

New Principal Place of Business:

Current Mailing Address:

1925 TRAYLOR BLVD
ORLANDO, FL 32804 US

New Mailing Address:

FEI Number: 59-2789167 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

DAVIS, LARRY
1925 TRAYLOR BLVD
ORLANDO, FL 32804 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: MURRAY, MICHAEL
Address: 4019 CONWAY CIRCLE
City-St-Zip: ORLANDO, FL 30812

Title: VP ( ) Delete
Name: RIGGS, DEBRA
Address: 1630 FERRIS AVE
City-St-Zip: ORLANDO, FL 32803

Title: VP ( ) Delete
Name: DAVIS, LARRY W
Address: 1925 TRAYLOR BLVD
City-St-Zip: ORLANDO, FL 32804

Title: SD ( ) Delete
Name: LEE, GREGORY
Address: 215 N. EOLA DR
City-St-Zip: ORLANDO, FL 32801

Title: TD ( ) Delete
Name: DAVIDSON, SCOTT
Address: 1500 BRIARCLIFF DR
City-St-Zip: ORLANDO, FL 32806

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: LEE, GREGORY
Address: 941 N. WESTMORELAND DR
City-St-Zip: ORLANDO, FL 32804

Title: VP (X) Change ( ) Addition
Name: STEWART, JEROME
Address: 2465 STONEVIEW RD.
City-St-Zip: ORLANDO, FL 32806

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

Title: SD (X) Change ( ) Addition
Name: HUDSON, LESLIE
Address: 2610 WESTERN PKWY
City-St-Zip: WINTER PARK, FL 32789

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LARRY W. DAVIS VP 04/01/2005

Electronic Signature of Signing Officer or Director — Date