2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14993

FILED Feb 02, 2006 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business: 1925 TRAYLOR BLVD ORLANDO, FL 32804 US **Current Mailing Address: New Mailing Address:** 1925 TRAYLOR BLVD ORLANDO, FL 32804 US FEI Number: 59-2789167 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: DAVIS, LARRY DANMEYER, DEIDRE L 1925 TRAYLOR BLVD 1925 TRAYLOR BLVD US ORLANDO, FL 32804 US ORLANDO, FL 32804 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: DEIDRA L. DANMEYER 02/02/2006 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition LEE. GREGORY Name: Name: 941 N. WESTMORELAND DR Address: Address: City-St-Zip: ORLANDO, FL 32804 City-St-Zip: Title: () Delete Title: VΡ (X) Change () Addition STEWART, JEROME Name: SCOTT, PETER Name: Address: 2465 STONEVIEW RD. Address: 3110 GREAT OAKS LANE City-St-Zip: ORLANDO, FL 32806 City-St-Zip: ORLANDO, FL 32806 Title: () Delete Title: (X) Change () Addition DAVIS, LARRY W DANMEYER, DEIDRE L Name: Name: 1925 TRAYLOR BLVD Address: Address: 1925 TRAYLOR BLVD City-St-Zip: ORLANDO, FL 32804 City-St-Zip: ORLANDO, FL 32804 Title: SD () Delete Title: () Change () Addition Name: HUDSON, LESLIE Name: 2610 WESTERN PKWY Address: Address: City-St-Zip: WINTER PARK, FL 32789 City-St-Zip: Title: () Delete Title: (X) Change () Addition DAVIDSON, SCOTT YOUNGS, JOHN Name: Name: 1500 BRIARCLIFF DR 1715 OAKMONT LANE Address: Address: City-St-Zip: ORLANDO, FL 32806 City-St-Zip: ORLANDO, FL 32804

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: DEIDRE L. DANMEYER VP 02/02/2006