2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 25, 2002 8:00 am
Secretary of State
03-25-2002 90112 032 ****70.00

DOCUMENT # N15156

1. Entity Name

HALIFAX HABITAT FOR HUMANITY, INC.

Principal Place of Business	Mailing Address
826 WHITE STREET DAYTONA BEACH FL 32117 US	826 WHITE STREET DAYTONA BEACH FL 32117 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2687200 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

STRASSER, BERNARD H.
235 RIVERSIDE DR.
ORMOND BEACH FL 32176

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

8. 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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BOUCHARD, RAYMOND 45 BANYAN DRIVE ORMOND BEACH FL 32176	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HOOD, DAVID 444 SEABREEZE BLVD. DAYTONA BEACH FL 32118	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD STRASSER, BERNARD H 116 E. GRANADA BLVD. ORMOND BEACH FL 32176	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD MARONEY, PHILIP c/o 275 CLYDE MORRIS BLVD. ORMOND BEACH FL 32174	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BRINKLEY, CARL REV PO BOX 2311 DAYTONA BEACH FL 32115	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD STRASSER, BERNARD 116 E. GRANADA BLVD. ORMOND BEACH FL 32176	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP MARONEY, PHILIP 275 CLYDE MORRIS BLVD ORMOND BEACH FL 32174	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HARDRICK, BRUNZY 71 CREEK BLUFF WAY ORMOND BEACH FL 32174	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P HOOD, DAVID PO BOX 15200 DAYTONA BEACH FL 32115	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BOUCHARD, RAYMOND 45 BANYAN DRIVE ORMOND BEACH FL 32176	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HARDRICK, BRUNZY 71 CREEK BLUFF WAY ORMOND BEACH FL 32174	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/01)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Lori M. Gillooly Lori M. Gillooly Exec. Director 3-7-02 386-257-9950
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #