

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31083

FILED
Apr 03, 2008
Secretary of State

Entity Name: HABITAT FOR HUMANITY OF THE UPPER KEYS, INC.

Current Principal Place of Business:

98970 OVERSEAS HWY
KEY LARGO, FL 33037

New Principal Place of Business:

Current Mailing Address:

PO BOX 2151
KEY LARGO, FL 33037

New Mailing Address:

FEI Number: 65-0169353

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDERSON, WILLIAM A
99330 OVERSEAS HWY
KEY LARGO, FL 33037 US

Name and Address of New Registered Agent:

DUNCAN, CHADWICK V E.D.
35250 SW 177TH CT.
185
KEY LARGO, FL 33037 US

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: CHADWICK DUNCAN

04/03/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HENCH, DOUG
Address: 1018 ADAMS DR
City-St-Zip: KEY LARGO, FL 33037

Title: V () Delete
Name: MCAFEE, DAN
Address: 136 OLD FASHION RD
City-St-Zip: TAVERNIER, FL 33070

Title: S () Delete
Name: GROVE, DEBBIE
Address: 204 PLANTATION SHORES DR
City-St-Zip: TAVERNIER, FL 33070

Title: T () Delete
Name: YOUNG, MIMI
Address: 87200 OVERSEAS HWY UNIT P4
City-St-Zip: ISLAMORADA, FL 33036

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: CHADWICK DUNCAN

E.D.

04/03/2008

Electronic Signature of Signing Officer or Director

Date