2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31083

Apr 13, 2009 Secretary of State

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

Current Principal Place of Business: New Principal Place of Business:

98970 OVERSEAS HWY KEY LARGO, FL 33037

Current Mailing Address: New Mailing Address:

PO BOX 2151 KEY LARGO, FL 33037

FEI Number: 65-0169353 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:

DUNCAN, CHADWICK V E.D. DUNCAN, CHADWICK V E.D. 35250 SW 177TH CT. 98970 OVERSEAS HWY KEY LARGO, FL 33037 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: 04/13/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition HENCH, DOUG HENCH, DOUG Name: Name:

1018 ADAMS DR Address: 1018 ADAMS DR Address: City-St-Zip: KEY LARGO, FL 33037 City-St-Zip: KEY LARGO, FL 33037

Title: Title: () Delete (X) Change () Addition Name: MCAFEE, DAN Name: REED, JOEL

Address: 136 OLD FASHION RD Address: 68 SHORELAND DRIVE City-St-Zip: TAVERNIER, FL 33070 City-St-Zip: KEY LARGO, FL 33037

Title: () Delete Title: (X) Change () Addition

GROVE, DEBBIE ANTHONY, LYNDA Name: Name:

204 PLANTATION SHORES DR 92410 OVERSEAS HIGHWAY, SUITE 3 Address: Address:

City-St-Zip: TAVERNIER, FL 33070 City-St-Zip: TAVERNIER, FL 33070

() Delete Title: Title: (X) Change () Addition

Name: YOUNG, MIMI Name: YOUNG, MIMI

87200 OVERSEAS HWY UNIT P4 87200 OVERSEAS HWY UNIT P4 Address: Address: City-St-Zip: ISLAMORADA, FL 33036 City-St-Zip: ISLAMORADA, FL 33036

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: DOUG HENCH V 04/13/2009