

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N43200 (7)

1. Corporation Name

HABITAT FOR HUMANITY OF BOCA-DELRAY, INC.



Principal Place of Business

Mailing Address

600 W. CAMINO REAL
BOCA RATON FL 33486-5523

600 W CAMINO REAL
BOCA RATON FL 33486
US

3. Date Incorporated or Qualified
04/29/1991

3a. Date of Last Report
05/26/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number
65-0307017

Applied For
 Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

JOHN SHELLY
600 W CAMINO REAL
BOCA RATON FL 33486

10. Name and Address of New Registered Agent

81 Name **DANIEL P. RIEMER**
82 Street Address (P.O. Box Number is Not Acceptable)
600 W. CAMINO REAL BLVD.
83
84 City **BOCA RATON** FL 85 Zip Code **33486**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Daniel P. Riemer

1-25-96

Signature, typed or printed name of registered agent and his, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|---|---|--|
| TITLE | EOD <input checked="" type="checkbox"/> DELETE | 1.1 TITLE | EXECUTIVE DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | SHELLY, JOHN | 1.2 NAME | DANIEL P. RIEMER |
| STREET ADDRESS | 600 W. CAMINO REAL | 1.3 STREET ADDRESS | 600 W. CAMINO REAL BLVD |
| CITY - ST - ZIP | BOCA RATON FL 33486 | 1.4 CITY - ST - ZIP | BOCA RATON, FL 33486 |
| TITLE | TD <input type="checkbox"/> DELETE | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | DRECKER, ROBERT | 2.2 NAME | |
| STREET ADDRESS | 600 W. CAMINO REAL | 2.3 STREET ADDRESS | |
| CITY - ST - ZIP | BOCA RATON FL 33486 | 2.4 CITY - ST - ZIP | |
| TITLE | SD <input checked="" type="checkbox"/> DELETE | 3.1 TITLE | SECRETARY - DIRECTOR <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | MOYES, BOBBIE | 3.2 NAME | ANNE SORRELLE |
| STREET ADDRESS | 600 W. CAMINO REAL | 3.3 STREET ADDRESS | 600 W. CAMINO REAL BLVD |
| CITY - ST - ZIP | BOCA RATON FL 33486 | 3.4 CITY - ST - ZIP | BOCA RATON, FL 33486 |
| TITLE | PD <input type="checkbox"/> DELETE | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | JACOBS, GERALD | 4.2 NAME | |
| STREET ADDRESS | 600 W. CAMINO REAL | 4.3 STREET ADDRESS | |
| CITY - ST - ZIP | BOCA RATON FL 33486 | 4.4 CITY - ST - ZIP | |
| TITLE | PD <input checked="" type="checkbox"/> DELETE | 5.1 TITLE | VICE PRESIDENT - DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | TRUESDELL, JOHN A | 5.2 NAME | RICHARD ANDERSON |
| STREET ADDRESS | 6857 ENTRADA PLACE | 5.3 STREET ADDRESS | 600 W. CAMINO REAL BLVD |
| CITY - ST - ZIP | BOCA RATON FL | 5.4 CITY - ST - ZIP | BOCA RATON, FL 33486 |
| TITLE | <input type="checkbox"/> DELETE | 6.1 TITLE | ASSIST. TREASURER - DIRECTOR <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | | 6.2 NAME | MICHAEL CLARK |
| STREET ADDRESS | | 6.3 STREET ADDRESS | 600 W. CAMINO REAL BLVD |
| CITY - ST - ZIP | | 6.4 CITY - ST - ZIP | BOCA RATON, FL 33486 |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Daniel P. Riemer* **DANIEL P. RIEMER** 1/25/96 (407) 394-6070

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)