

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000794

FILED
Mar 03, 2010
Secretary of State

Entity Name: FLAGLER HABITAT FOR HUMANITY, INC.

Current Principal Place of Business:

2 W MOODY BLVD
BUNNELL, FL 32110 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 187
BUNNELL, FL 32110 US

New Mailing Address:

FEI Number: 59-3172803

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELLIOT, LINDA
2 W MOODY BLVD
BUNNELL, FL 32110 US

Name and Address of New Registered Agent:

ELLIOTT, LINDSAY
2 W MOODY BLVD
BUNNELL, FL 32110 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: LINDSAY ELLIOTT

03/03/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: GIUMENTA, RIC
Address: 4871 PALM COAST PKWY NW # 3
City-St-Zip: PALM COAST, FL 32137

Title: VP
Name: BUGNET, SHERRY
Address: 7 WHITEWING PLACE
City-St-Zip: PALM COAST, FL 32137

Title: ED
Name: ELLIOTT, LINDSAY
Address: 808 W MINNESOTA BLVD
City-St-Zip: DELAND, FL 32720

Title: TREA
Name: PALACIOS, ERICK
Address: 235 PALM COAST PARKWAY NORTHEAST
City-St-Zip: PALM COAST, FL 32137

Title: S
Name: MCDERMOTT, SANDRA
Address: 15 CYPRESS BRANCH WAY #203
City-St-Zip: PALM COAST, FL 32164

I hereby 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 all other like empowered.

SIGNATURE: LINDSAY ELLIOTT

ED

03/03/2010

Electronic Signature of Signing Officer or Director

Date