2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000245

FILED Jan 16, 2008 Secretary of State

Entity Name: HABITAT FOR HUMANITY OF HERNANDO COUNTY, INC.

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

2035 BROAD STREET

BROOKSVILLE, FL 346047717 US

Current Mailing Address: New Mailing Address:

P.O. BOX 15389

BROOKSVILLE, FL 346047717 US

FEI Number: 59-3192261 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:

FOUTS, CLIFFORD B SR. 2035 BROAD STREET BROOKSVILLE, FL 346047717 US

OFFICERS AND DIRECTORS:

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:

Electronic Signature of Registered Agent Date

Electronic Signature of Registered

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 BARTLETT, DIANA
 Name:
 BARTLETT, DIANA

 Address:
 10 COMMERCIAL WAY
 Address:
 82 COMMERCIAL WAY

 City-St-Zip:
 SPRING HILL, FL 34606 US
 City-St-Zip:
 SPRING HILL, FL 34606 US

Title: P () Delete Title: P (X) Change () Addition Name: JILLINGS, ROBERT Name: ALDRIDGE, KENNETH

Address: 15628 OAKCREST CIRCLE Address: 15485 DEER PATH DRIVE City-St-Zip: BROOKSVILLE, FL 34604 US BROOKSVILLE, FL 34604 US

Title: VP () Delete Title: VP (X) Change () Addition
Name: ALDRIDGE, KEN Name: YOOS, WILLIAM C JR.
Address: 15485 DEER PATH DRIVE Address: 10133 SOUTHERN BREEZE

Address: 15485 DEER PATH DRIVE Address: 10133 SOUTHERN BREEZE
City-St-Zip: BROOKSVILLE, FL 34604 City-St-Zip: WEEKI WACHEE, FL 34613

 Name:
 FOUTS, CLIFF
 Name:
 FOUTS, C. B SR.

 Address:
 24144 WESTMINSTER CT.
 Address:
 24144 WESTMINSTER CT.

 City-St-Zip:
 BROOKSVILLE, FL 346014849
 City-St-Zip:
 BROOKSVILLE, FL 346014849

Title: S () Delete Title: () Change () Addition

 Name:
 PALMERI, ARLENE
 Name:

 Address:
 2106 WATERVIEW TERRACE
 Address:

 City-St-Zip:
 SPRING HILL, FL 34609 US
 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: CLIFFORD B. FOUTS E.D. 01/16/2008