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Jul 02 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # N93000004230 (9)
1. Corporation Name
HABITAT FOR HUMANITY OF KEY WEST AND LOWER FLORIDA KEYS, INC.



Principal Place of Business: 3424 N. ROOSEVELT BLVD. KEY WEST FL 33040
Mailing Address: P.O. BOX 421003 KEY WEST FL 33041 US
SUMMERLAND KEY, FLORIDA 33042

2. Principal Place of Business: 21 20959 5th Ave W
Suite, Apt. #, etc.: 22
City & State: 23 Cudjoe Key, FL
Zip: 24 33042 Country: 25 Honoe
2a. Mailing Address: 26 P.O. BOX 421003
Suite, Apt. #, etc.: 27
City & State: 28 SUMMERLAND KEY, FL
Zip: 29 33042 Country: 30 US

3. Date Incorporated or Qualified: 09/15/1993
4. FEI Number: 65-0443188 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
7. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
AQUINO, MARJORIE L.
212 TELEGRAPH LANE
#B
KEY WEST FL 33040

10. Name and Address of New Registered Agent
81 Name: Gerald W Pletan
82 Street Address (P.O. Box Number is Not Acceptable): 2500 Overseas Hwy
83 Summerland Key
84 City: FL 85 Zip Code: 33042

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: *Gerald W Pletan* DATE: 4/24/98
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	KRUGER, PAUL	
STREET ADDRESS	3424 N. ROOSEVELT BLVD.	
CITY-ST-ZIP	KEY WEST FL 33040	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	AQUINO, MARJORIE	
STREET ADDRESS	212 TELEGRAPH LANE, #B	
CITY-ST-ZIP	KEY WEST FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	KRAMER, ROBERT	
STREET ADDRESS	615 ELIZABETH STREET	
CITY-ST-ZIP	KEY WEST FL 33040	
TITLE	D	<input type="checkbox"/> DELETE
NAME	PETER ANDERSON	
STREET ADDRESS	615 GREEN STREET (#13)	
CITY-ST-ZIP	KEY WEST, FLORIDA 33040	
TITLE	D	<input type="checkbox"/> DELETE
NAME	JOHN LARKIN	
STREET ADDRESS	1865 OVERSEAS HIGHWAY	
CITY-ST-ZIP	MARATHON, FLORIDA 33050	
TITLE	D	<input type="checkbox"/> DELETE
NAME	RICHARD CASEY, JR	
STREET ADDRESS	31036 AVENUE H	
CITY-ST-ZIP	BIG PINE KEY, FL 33043	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE		
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	SECRETARY (D)	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	MS. ROBERTA LOUDENSLAGER	
4.3 STREET ADDRESS	105 5th AVE (WEST) CUDJOE KEY,	
4.4 CITY-ST-ZIP	SUMMERLAND KEY, FL 33042	
5.1 TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Richard A Casey Jr* DATE: 4/23/98 (305)
RICHARD A CASEY JR 292-1321

CR2E037 (10/97)