

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 19, 2000 8:00 am
Secretary of State

01-19-2000 90289 001 ****61.25

DOCUMENT # N93000004230

1. Entity Name

HABITAT FOR HUMANITY OF KEY WEST AND LOWER FLORI

Principal Place of Business

Mailing Address

~~20960 5TH AVE W~~
~~CUDJOE KEY FL 33042~~
~~US~~

17 Ships Way
Big Pine Key, FL 33043
US

P O BOX 421003
 SUMMERLAND KEY FL 33042-1003
 US



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

KEY WEST
~~HABITAT FOR HUMANITY OF KEY WEST AND LOWER FLORIDA KEYS, INC.~~

Suite, Apt. #, etc.

Suite, Apt. #, etc.

17 Ships Way

City & State

4. FEI Number

65-0443188

Applied For

Not Applicable

Big Pine Key, FL.

Zip

Country

Zip

Country

33043

USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

PLETAN, GERALD W
25000 OVERSEAS HWY
SUMMERLAND KEY FL 33042

Name *Gerald W Adams*

Street Address (P.O. Box Number is Not Acceptable)

75000 Overseas Hwy

Summerland Key FL

Zip Code

33042

8. 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Delete
 NAME **PD ANDERSON, PETER**
 STREET ADDRESS **615 GREEN ST #13**
 CITY-ST-ZIP **KEY WEST FL 33040**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **VD LARKIN, JOHN**
 STREET ADDRESS **1865 OVERSEAS HIGHWAY**
 CITY-ST-ZIP **MARATHON FL 33050**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **TD CASEY, RICHARD J**
 STREET ADDRESS **31036 AVENUE H**
 CITY-ST-ZIP **BIG PINE KEY FL 33043**

TITLE Change Addition
 NAME *Jesse R. Burley*
 STREET ADDRESS *22386 LaFitte Drive*
 CITY-ST-ZIP *Summerland Key, FL 33042*

TITLE Delete
 NAME **SD KEMP, DEWAYNE**
 STREET ADDRESS **22386 LAFITTE DRIVE**
 CITY-ST-ZIP **CUDJOE KEY FL 33042**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jesse R. Burley
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1-11-00

Daytime Phone #

305 293-2360

CR2E037 (9/99)