

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000005468

FILED
Jan 14, 2009
Secretary of State

Entity Name: HABITAT FOR HUMANITY OF WINTER PARK/MAITLAND, INC.

Current Principal Place of Business:

233 WEST PARK AVENUE
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1196
WINTER PARK, FL 32790 US

New Mailing Address:

FEI Number: 59-3213310

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GEORGE, HAL
233 WEST PARK AVENUE
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: GEORGE, HAL
Address: 233 WEST PARK AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: T () Delete
Name: BRIGGS, JEFF
Address: 1411 BUCKINGHAM ROAD
City-St-Zip: WINTER PARK, FL 32789

Title: S () Delete
Name: SWAIN, JOYCE
Address: P.O. BOX 3601
City-St-Zip: WINTER PARK, FL 32790

Title: P () Delete
Name: SEYMOUR, THADDEUS
Address: 1804 SUMMERFIELD ROAD
City-St-Zip: WINTER PARK, FL 32792

Title: D () Delete
Name: SELL, ROGER
Address: 1730 ONECO AVENUE
City-St-Zip: WINTER PARK, FL 32789

Title: D () Delete
Name: RUDOLPH, CHRIS
Address: 649 BLAIRSHIRE CIRCLE
City-St-Zip: WINTER PARK, FL 32792

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: JEFF BRIGGS

T

01/14/2009

Electronic Signature of Signing Officer or Director

Date