Name and Address of Current Registered Agent:				
LEFKOW, LISA 11145 TAMIAMI TRAL EAST NAPLES, FL 34113 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: LISA LEFKOW				02/06/2024
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	CHAIR PERSON	Title	CEO	
Name	FLYNN-FOX, KATHLEEN	Name	LEFKOW, LISA REV.	
Address	4851 BONITA BAY BLVD	Address	1490 NOTTINGHAM DR	
City-State-Zip:	#603 BONITA SPRINGS, FL 34134	City-State-Zip:	NAPLES FL 34109	
Title	VICE PRESIDENT & CFO			
Name	KACOS, DEAN			
Address	11145 TAMIAMI TRL E			

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.

CFO

SIGNATURE: DEAN KACOS

City-State-Zip: NAPLES FL 34113

Electronic Signature of Signing Officer/Director Detail

11145 TAMIAMI TRAL EAST NAPLES, FL 34113

# **Current Mailing Address:**

11145 TAMIAMI TRAL EAST NAPLES. FL 34113 US

# FEI Number: 59-1834379

### Na

# **DOCUMENT# 742136**

**Current Principal Place of Business:** 

#### Entity Name: HABITAT FOR HUMANITY OF COLLIER COUNTY, INC.

# 2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

# FILED Feb 06, 2024 Secretary of State 6206731236CC

Certificate of Status Desired: Yes

02/06/2024 Date