

**2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N01000005978

**FILED**  
**Jan 12, 2019**  
**Secretary of State**  
**7893528829CC**

**Entity Name:** HABITAT FOR HUMANITY OF LAKE CITY/COLUMBIA COUNTY, INC.

**Current Principal Place of Business:**

4641 W US HWY 90  
LAKE CITY, FL 32055

**Current Mailing Address:**

PO BOX 487  
LAKE CITY, FL 32056

**FEI Number: 59-3736063**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

STUART, PATRICIA B  
4641 W US HWY 90  
LAKE CITY, FL 32055 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: PATRICIA STUART**

**01/12/2019**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	OTHER	Title	VICECHAIRMAN, VC
Name	HUGGINS, SALLY	Name	HUNT, DARRELL
Address	643 SW LEGION DRIVE	Address	119 NW ETHAN PLACE
City-State-Zip:	LAKE CITY FL 32024	City-State-Zip:	LAKE CITY FL 32055
Title	CD	Title	TREASURER
Name	LEE, LARRY	Name	STUART, PATRICIA B
Address	300 SW SUNUP GLEN	Address	510 NW KAYLEE GLN
City-State-Zip:	LAKE CITY FL 32024	City-State-Zip:	LAKE CITY FL 32055
Title	CHAIRMAN		
Name	STEPHENS, MONTY		
Address	137 NW BIRDIE PLACE		
City-State-Zip:	LAKE CITY FL 32055		

*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.*

**SIGNATURE: PATRICIA B STUART**

**TREASURER**

**01/12/2019**

Electronic Signature of Signing Officer/Director Detail

Date