

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005978

FILED
Jan 15, 2016
Secretary of State
CC0525018283

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

01/15/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name HUGGINS, SALLY
Address 643 SW LEGION DRIVE
City-State-Zip: LAKE CITY FL 32024

Title CD
Name ROBERT, JORDAN
Address 934 NE LAKE DE SOTO CIRCLE
City-State-Zip: LAKE CITY FL 32055

Title CHAIRMAN
Name HUNT, DARRELL
Address 119 NW ETHAN PLACE
City-State-Zip: LAKE CITY FL 32055

Title CD
Name LECLAIR, PAUL
Address 127 SW WILSHIRE DRIVE
City-State-Zip: LAKE CITY FL 32024

Title CD
Name LEE, LARRY
Address 300 SW SUNUP GLEN
City-State-Zip: LAKE CITY FL 32024

Title VC
Name BURNHAM, GEORGE L JR.
Address 7416 65TH DRIVE
City-State-Zip: LIVE OAK FL 32060

Title TREASURER
Name STUART, PATRICIA B
Address 510 NW KAYLEE GLN
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 STUART

TREASURER

01/15/2016

Electronic Signature of Signing Officer/Director Detail

Date