

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000009515

Entity Name: HABITUDE INCORPORATED**Current Principal Place of Business:**1045 GULF OF MEXICO DR.
NO. 602
LONGBOAT KEY, FL 34228**Current Mailing Address:**1045 GULF OF MEXICO DR.
NO. 602
LONGBOAT KEY, FL 34228 US**FEI Number:** 20-5793595**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STEVES, DAVID A
1800 SECOND STREET
780
SARASOTA, FL 34236 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	P
Name	HURWITZ, MARTIN A
Address	1045 GULF OF MEXICO DR., #602
City-State-Zip:	LONGBOAT KEY FL 34228
Title	D
Name	PRIANO, FEDERICA PH.D
Address	5104 LOCKWOOD RIDGE RD. SUITE 105
City-State-Zip:	SARASOTA FL 34234
Title	D
Name	SAMSON, SUSAN
Address	5137 JUNGLE PLUM ROAD
City-State-Zip:	SARASOTA FL 34242

Title	T
Name	HURWITZ, MARTIN A
Address	1045 GULF OF MEXICO DR., #602
City-State-Zip:	LONGBOAT KEY FL 34228
Title	S
Name	TRUSCOTT, MARSA A
Address	1350 MAIN STREET UNIT 1005
City-State-Zip:	SARASOTA FL 34236
Title	D
Name	WEBLEY, KENNETH III
Address	5201 BIRCH AVE.
City-State-Zip:	SARASOTA FL 34233

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: MARTIN A. HURWITZ**PRESIDENT****04/30/2014**_____
Electronic Signature of Signing Officer/Director Detail_____
Date