

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N19679

**Entity Name:** HABITAT FOR HUMANITY OF HILLSBOROUGH COUNTY  
FLORIDA, INC.

**FILED**  
**Mar 08, 2016**  
**Secretary of State**  
**CC5478519323**

**Current Principal Place of Business:**

3736 E. HILLSBOROUGH AVE.  
TAMPA, FL 33610

**Current Mailing Address:**

3736 E. HILLSBOROUGH AVE.  
TAMPA, FL 33610 US

**FEI Number: 59-2850410**

**Certificate of Status Desired: Yes**

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

SWAIN, TINA  
3736 E. HILLBOROUGH AVE.  
TAMPA, FL 33610 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: TINA SWAIN**

**03/08/2016**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CEO  
Name SWAIN, TINA E  
Address 3736 E. HILLSBOROUGH AVE.  
City-State-Zip: TAMPA FL 33610

Title CHAIRWOMAN  
Name MOORE, JACQUELINE  
Address 17021 SHADY PINES DR  
City-State-Zip: LUTZ FL 33548

Title TREASURER  
Name HIRST, AUDREY  
Address 7028 W WATERS AVE  
263  
City-State-Zip: TAMPA FL 33634

Title VICE CHAIR  
Name BROOKS, ANTHONY  
Address 13402 ROSLYN PLACE  
City-State-Zip: TAMPA FL 33626

Title SECRETARY  
Name ACUFF, BENNETT  
Address 2903 W SITIOS STREET  
City-State-Zip: TAMPA FL 33629

*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: TINA SWAIN**

**CEO**

**03/08/2016**

Electronic Signature of Signing Officer/Director Detail

Date