

**2013 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# N19679

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

**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:**

GREEN, DEBBIE  
3736 E. HILLSBOROUGH 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title EXECUTIVE DIRECTOR  
Name BUCKLER, JACKIE  
Address 3736 E. HILLSBOROUGH AVE.  
City-State-Zip: TAMPA FL 33610

Title CHAIRMAN  
Name OLIVER, KELLY  
Address 5402 SOUTH CRESCENT DR.  
City-State-Zip: TAMPA FL 33611

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

*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: JACKIE BUCKLER**

**EXECUTIVE DIRECTOR**

**09/24/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date