

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33127

FILED
Mar 14, 2018
Secretary of State
CC3865532903

Entity Name: HABITAT FOR HUMANITY OF LAKE-SUMTER, FLORIDA, INC.

Current Principal Place of Business:

900 MAIN ST, SUITE 210
THE VILLAGES, FL 32159

Current Mailing Address:

900 MAIN ST, SUITE 210
THE VILLAGES, FL 32159 US

FEI Number: 59-2958036

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

LOWMAN, WILLIAM R JR, ESQ.
SHUFFIELD, LOWMAN & WILSON, P.A.
1000 LEGION PLACE, SUITE 1700
ORLANDO, FL 32801 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: WILLIAM R. LOWMAN, JR.

03/14/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name RAMIREZ, FELIX
Address 900 MAIN ST, SUITE 210
City-State-Zip: THE VILLAGES FL 32159

Title DIRECTOR
Name MAZE, JOHN
Address 900 MAIN ST, SUITE 210
City-State-Zip: THE VILLAGES FL 32159

Title DIRECTOR
Name MILLER, RICK
Address 900 MAIN ST, SUITE 210
City-State-Zip: THE VILLAGES FL 32159

Title DIRECTOR, VP
Name NERON, BILL
Address 900 MAIN ST, SUITE 210
City-State-Zip: THE VILLAGES FL 32159

Title DIRECTOR, CEO
Name ADCOCK, KENT
Address 900 MAIN ST, SUITE 210
City-State-Zip: THE VILLAGES FL 32159

Title DIRECTOR
Name BEUCHER, BUD
Address 900 MAIN ST, SUITE 210
City-State-Zip: THE VILLAGES FL 32159

Title DIRECTOR
Name WHETRO, PAULA
Address 900 MAIN ST, SUITE 210
City-State-Zip: THE VILLAGES FL 32159

Title DIRECTOR
Name LACHNICHET, GERARD
Address 900 MAIN ST, SUITE 210
City-State-Zip: THE VILLAGES FL 32159

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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: KENT ADCOCK

DIRECTOR

03/14/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name OLSON, SHERI
Address 900 MAIN ST, SUITE 210
City-State-Zip: THE VILLAGES FL 32159

Title DIRECTOR
Name ZEHNDER, ZACH
Address 900 MAIN ST, SUITE 210
City-State-Zip: THE VILLAGES FL 32159

Title SECRETARY
Name FARMER, WILLIAM
Address 900 MAIN ST, SUITE 210
City-State-Zip: THE VILLAGE FL 32159

Title DIRECTOR
Name DAVIS, JASON
Address 900 MAIN ST, SUITE 210
City-State-Zip: THE VILLAGES FL 32159

Title DIRECTOR
Name RANKIN, MICHAEL
Address 900 MAIN ST, SUITE 210
City-State-Zip: THE VILLAGES FL 32159

Title TREASURER
Name CLEMENTS, MISTY
Address 900 MAIN ST, SUITE 210
City-State-Zip: THE VILLAGES FL 32159

Title DIRECTOR, PRESIDENT
Name OWEN, LEE
Address 900 MAIN ST, SUITE 210
City-State-Zip: THE VILLAGES FL 32159

Title DIRECTOR
Name GLASSO, DANTE
Address 900 MAIN ST, SUITE 210
City-State-Zip: THE VILLAGES FL 32159