

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000794

**FILED
Feb 20, 2014
Secretary of State
CC1031574164**

Entity Name: FLAGLER HABITAT FOR HUMANITY, INC.

Current Principal Place of Business:

2 W MOODY BLVD
BUNNELL, FL 32110

Current Mailing Address:

PO BOX 187
BUNNELL, FL 32110 US

FEI Number: 59-3172803

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

ELLIOTT, LINDSAY
2 W MOODY BLVD
BUNNELL, FL 32110 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 PRESIDENT
Name MCDERMOTT, SANDRA
Address 3 SUGAR MILL LANE
City-State-Zip: PALM COAST FL 32136

Title VP
Name NORTHRUP, ROBERT
Address 204 BELLEAIRE DR
City-State-Zip: PALM COAST FL 32137

Title ED
Name ELLIOTT, LINDSAY
Address 808 W MINNESOTA BLVD
City-State-Zip: DELAND FL 32720

Title TREA
Name LECKIE, JACK
Address HAMMOCK DUNES
City-State-Zip: PALM COAST FL 32137

Title S
Name TOFAL, DONNA
Address 17 CEDAR HALLOW
City-State-Zip: PALM COAST FL 32137

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: LINDSAY ELLIOTT

EX. DIRECTOR

02/20/2014

Electronic Signature of Signing Officer/Director Detail

Date