

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000245

FILED
Jan 10, 2014
Secretary of State
CC8166914069

Entity Name: HABITAT FOR HUMANITY OF HERNANDO COUNTY, INC.

Current Principal Place of Business:

19450 CORTEZ BLVD.
BROOKSVILLE, FL 34601

Current Mailing Address:

P.O. BOX 15389
BROOKSVILLE, FL 34604-7717 US

FEI Number: 59-3192261

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

FOUTS, CLIFFORD BSR.
19450 CORTEZ BLVD.
BROOKSVILLE, FL 34601 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 T
Name BARTLETT, DIANA
Address 10810 COUNTY LINE RD.
City-State-Zip: HUDSON FL 34667

Title P
Name LAMPERT, FRED W
Address 4396 4TH ISLE DRIVE
City-State-Zip: HERNANDO BEACH FL 34607

Title VP
Name DANIEL, SALLY
Address 4435 BASEBALL POND RD
City-State-Zip: BROOKSVILLE FL 34602

Title ED
Name FOUTS, C. BSR.
Address 24144 WESTMINSTER CT.
City-State-Zip: BROOKSVILLE FL 34601-4849

Title S
Name DUNCAN, SARAH
Address 5172 MARINER BLVD.
City-State-Zip: SPRING HILL FL 34609

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: C. FOUTS

E.D.

01/10/2014

Electronic Signature of Signing Officer/Director Detail

Date