2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005978

FILED Apr 29, 2008 Secretary of State

Entity Name: HABITAT FOR HUMANITY OF LAKE CITY/COLUMBIA COUNTY, INC.

Current Principal Place of Business: New Principal Place of Business: 393 NW FAIRWAY DRIVE 506 SW WALTER AVENUE LAKE CITY, FL 32055 LAKE CITY, FL 32024 **Current Mailing Address: New Mailing Address:** PO BOX 487 LAKE CITY, FL 32056 FEI Number: 59-3736063 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: LEMLEY, BARBARA J FATZINGER, CARL W 393 NW FAIRWAY DRIVE 506 SW WALTER AVENUE LAKE CITY, FL 32055 LAKE CITY, FL 32024 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: CARL W. FATZINGER 04/29/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition FATZINGER, JERRY S Name: Name: 506 SW WALTER AVE Address: Address: LAKE CITY, FL 32024 City-St-Zip: City-St-Zip: Title: CD () Delete Title: CD (X) Change () Addition COBB, BILL Name: COBB, BILL Name: Address: 254 S.E. WOODHAVEN ST. Address: 254 SE WOODHAVEN ST. City-St-Zip: LAKE CITY, FL 32025 City-St-Zip: LAKE CITY, FL 32025 Title: CD () Delete Title: CD (X) Change () Addition LEMLEY, BARBARA J BRECHEEN, MIKE Name: Name: 393 NW FAIRWAY DRIVE 480 SE LILLIAN LOOP # 103 Address: Address: City-St-Zip: LAKE CITY, FL 32055 City-St-Zip: LAKE CITY, FL 32025 Title: CD () Delete Title: CD (X) Change () Addition MELUM, JOHN Name: STONE, DOTTIE Name: 678 NW EMERALD LAKES DRIVE Address: 415 NW 3RD STREET Address: City-St-Zip: HIGH SPRINGS, FL 32643 City-St-Zip: LAKE CITY, FL 32055 Title: () Delete Title: CD () Change (X) Addition LECLAIR, PAUL Name: Name: 127 SW WILSHIRE DRIVE Address: Address: City-St-Zip: City-St-Zip: LAKE CITY, FL 32024 Title: () Delete Title: () Change (X) Addition MELUM, MARY Name: Name: Address: Address: 678 NW EMERALD LAKES DRIVE LAKE CITY, FL 32055 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CARL W. FATZINGER CD 04/29/2008