2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N37776

FILED Feb 18, 2008 Secretary of State

Entity Name: INDIAN RIVER COUNTY HABITAT FOR HUMANITY, INC.

Current Principal Place of Business: New Principal Place of Business:

4568 N US HWY #1

VERO BEACH, FL 32967 US

Current Mailing Address: New Mailing Address:

4568 N US HWY #1

VERO BEACH, FL 32967 US

FEI Number: 65-0230079 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:

HAFNER, TROY C/O GOÚLD, COOKSEY, FENNELL, ET AL 979 BEACHLAND BLVD VERO BEACH, FL 32963 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:

Date

Electronic Signature of Registered Agent

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition SMITH, JEFF BEINDORF, ANDY Name: Name:

325 28TH COURT SW Address: 958 20TH PLACE Address: City-St-Zip: VERO BEACH, FL 32968 City-St-Zip: VERO BEACH, FL 32960

Title: SD Title: SD (X) Change () Addition () Delete

RENNICK, SANDRA Name: TRAX, CAROL REV Name: Address: 979 BEACHLAND BLVD Address: 1901 23RD STREET City-St-Zip: VERO BEACH, FL 32963 City-St-Zip: VERO BEACH, FL 32960

Title: () Delete Title: () Change () Addition

BOWLER, ANDREW Name: Name: 670 45TH CT. SW Address: Address: City-St-Zip: VERO BEACH, FL 32968 City-St-Zip:

(X) Change () Addition Title: CD () Delete Title: CD

Name: KENYON, FRANCE Name: DONARS, RENE 701 MANATEE COVE Address: Address: 4302 BETHEL CREEK DRIVE City-St-Zip: VERO BEACH, FL 32963 City-St-Zip: VERO BEACH, FL 32963

Title: VD () Delete Title: VD (X) Change () Addition

DONARS, RENE BARKETT, BRUCE Name: Name: 4302 BETHEL CREEK DRIVE 756 BEACHLAND BLVD Address: Address: City-St-Zip: VERO BEACH, FL 32963 City-St-Zip: VERO BEACH, FL 32963

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: ANDREW R. BOWLER **PRES** 02/18/2008