

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 24, 2000 8:00 am
Secretary of State

01-24-2000 90069 008 ****61.25

DOCUMENT # N37776

1. Entity Name

INDIAN RIVER COUNTY HABITAT FOR HUMANITY, INC.

Principal Place of Business

Mailing Address

2209 18TH AVE
 VERO BEACH FL 32960
 US

2209 18TH AVE
 VERO BEACH FL 32960-3408
 US

904643



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

2345 18th Avenue

2345 18th Avenue

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Vero Beach, FL

City & State

Vero Beach, FL

4. FEI Number

65-0230079

Applied For

Not Applicable

Zip

32960

Country

USA

Zip

32960

Country

US/IT

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

STEWART, NALL, EVANS & HAFNER
3355 OCEAN DRIVE
ATTENTION: TROY B HAFNER
VERO BEACH FL 32963

Name

Mr. Troy Hafner

Street Address (P.O. Box Number is Not Acceptable)

Gould, Cooksey, Fennell, D'Neil, Hafner

979 Beachland Blvd.

City

Vero Beach

FL

Zip Code

32963

8. 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 **Troy B. Hafner**

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

1/8/00

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Delete
 NAME **MD PEARSON, DAVE**
 STREET ADDRESS **235 COCONUT PALM**
 CITY-ST-ZIP **VERO BEACH FL 32963**

TITLE Change Addition
 NAME **Robert Showfety**
 STREET ADDRESS **Treasurer**
800 Beach Road, #371
 CITY-ST-ZIP **Vero Beach, FL 32963**

TITLE Delete
 NAME **DS HAFNER, TROY**
 STREET ADDRESS **3355 OCEAN DRIVE**
 CITY-ST-ZIP **VERO BEACH FL 32963**

TITLE Change Addition
 NAME **Troy Hafner**
 STREET ADDRESS **979 Beachland Blvd.**
 CITY-ST-ZIP **Vero Beach, FL 32963**

TITLE Delete
 NAME **T KING, ROBERT E**
 STREET ADDRESS **726 10TH CT**
 CITY-ST-ZIP **VERO BEACH FL 3296**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **VP FREDERICK, THOMAS**
 STREET ADDRESS **1605 MAJORCA**
 CITY-ST-ZIP **VERO BEACH FL 3296**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

X SIGNATURE REQUIRED

TROY HAFNER

DATE

1/8/00

DAYTIME PHONE #

561-231-1100

CR2E037 (9/99)