## 151033

| (Re                     | equestor's Name)   |            |
|-------------------------|--------------------|------------|
| (Ac                     | ddress)            | , <u>.</u> |
| (Ac                     | ddress)            |            |
| (Ci                     | ty/State/Zip/Phone | e #)       |
| PICK-UP                 | WAIT               | MAIL       |
| (Bı                     | ısiness Entity Nan | ne)        |
| (Do                     | ocument Number)    |            |
| ertified Copies         | _ Certificates     | of Status  |
| Special Instructions to | Filing Officer:    | ·          |
|                         |                    |            |
|                         |                    |            |
|                         |                    |            |
|                         |                    |            |
|                         |                    |            |

Office Use Only



900062078579

12/12/05--01031--016 \*\*35.00

SECRETARY OF STATE

PO Ch9

## **COVER LETTER**

| TO:    | Amendment Section Division of Corporations  |      |
|--------|---|------|
| SUBJ   | ECT: Habitat for Humanity of Citrus County, Inc. (Name of Corporation)  | •    |
| DOC    | UMENT NUMBER: N51033  |      |
| The er | aclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.  |      |
| Please | return all correspondence concerning this matter to the following:  |      |
|        | Glen C. Abbott, Esq.  |      |
|        | (Name of Contact Person)  |      |
|        | Glen C. Abbott, Attorney at Law (Firm/Company)  |      |
|        | 109 N.E. 4th Street (Address)   |      |
|        | Crystal River, FL 34429 - (City/State and Zip Code)   |      |
| For fu | ther information concerning this matter, please call:   |      |
| Gle    | AC. Abbott at (352) 795-5699 (Name of Contact Person) (Area Code & Daytime Telephone Num  | ber) |
| Enclos | ed is a \$35.00 check made payable to the Department of State.  |      |
|        | Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314  Street Address: Amendment Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 |      |

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of char                  | nge is submitted for a corp                             | oration organized  | 07.1508, or 617.1508, Florida<br>under the laws of the State of _<br>agent, or both, in the State of l                             | Florida  |
|------------------------------------|---|--|--|--|
| 1. The name of the                 | he corporation: Habitat fo                              | or Humanity of   | Citrus County, Inc.  |  |
| 2. The principal                   | office address: 6632 W.                                 | Norvell Bryant,  | Crystal River, FL 34429  |  |
| 3. The mailing ac                  | ddress (if different):                                  |  |  |  |
| 4. Date of incorp                  | oration/qualification: 9/2                              | 28/1992  | Document number: N510  | 33   |
| 5. The name and Florida Depart     |   | nt registered agent  | and registered office on file w  | ith the  |
|                                    | Glen C. Abbott, I                                       | Esq.   |  | 75 05  |
|                                    | 706 N. Suncoas  | st Blvd.   |  | 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1                              |
|                                    | Crystal River, FL                                       | _ 34429  |  | ASSE<br>ASSE   |
| 6. The name and (if changed):      | street address of the new re                            | egistered agent (if  | changed) and /or registered of   | fice E. FLOR   |
|                                    | Glen C. Abbott  | , Esq.   |  | DE A   |
|                                    | 109 N.E. 4th S  |  |  |  |
|                                    |   | x NOT acceptable)  |  | _  |
|                                    | Crystal River,  | FL 34429   | · · ·  | _  |
| The street address as changed will | ss of its registered office a<br>be identical.          | and the street addr  | ess of the business office of i  | ts registered agent,   |
| Such change wa<br>authorized by th | s authorized by resolution<br>board, or the corporation | ı duly adopted by<br>n has been notifie  | its board of directors or by ar d in writing of the change.  | officer so   |
|                                    | re of an officer or director)                           |  | John Thrumston, Presid   |  |
| I hereby accept i                  | the appointment as registe                              | ered agent and ag<br>ons of all statutes<br>accept the obligati<br>ychange in the rey<br>of this change. | ree to act in this capacity<br>relative to the proper and cor<br>on of my position as registere<br>gistered office address, I here | nplete performance<br>ed agent. Or, if this<br>by confirm that the |
|                                    | 1-14/11   |  | 12-8-0   | 35   |
| (Signing on bel                    | nature of Register Age (1)                              |  | (Date)   | <del></del>  |
| (Ty                                | yped or Printed Name)                                   |  |  |  |

\* \* \* FILING FEE: \$35.00 \* \* \*