2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51033

FILED
Jan 14, 2015
Secretary of State
CC2070184567

Entity Name: HABITAT FOR HUMANITY OF CITRUS COUNTY INC.

Current Principal Place of Business:

7800 W. GULF TO LAKE HWY
CRYSTAL RIVER, FL 34429

Current Mailing Address:

P.O. BOX 1041
CRYSTAL RIVER, FL 34423 US

FEI Number: 59-3136342

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ABBOTT, GLEN C
109 NE 4TH STREET
CRYSTAL RIVER, FL 34429 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	VICE-CHAIRPERSON	Title	CHAIRPERSON
Name	DALY, LINDA	Name	DEFELICE, CHRIS
Address	3334 W. PEBBLE BEACH CT.	Address	45981 E. BOTONY CT.
City-State-Zip:	LECANTO FL 34461	City-State-Zip:	FLORAL CITY FL 34436
Title	SECRETARY	Title	CEO
Name	HEINDEL, JOHN F	Name	RUSAW, ERNEST G
Address	1990 W. MATCHWOOD DR	Address	5750 N. LENA LN.
City-State-Zip:	BEVERLY HILLS FL 34465	City-State-Zip:	BEVERLY HILLS FL 34465
Title	TREASURER	Title	ASSISTANT SECRETARY & TREASURER
Name	HASEK, DONALD	Name	GIRSON, ROGER
Address	3100 N. CAVES VALLEY PATH	Address	3711 E. TURQUOISE DR.
City-State-Zip:	LECANTO FL 34461	City-State-Zip:	HERNANDO FL 34442

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: ELANE BIERER — BOOKKEEPER — 01/14/2015

Electronic Signature of Signing Officer/Director Detail — Date