

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N51033

Entity Name: HABITAT FOR HUMANITY OF CITRUS COUNTY INC.**Current Principal Place of Business:**7768 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 CEO
Name RUSAW, ERNEST G
Address 5750 N. LENA LN.
City-State-Zip: BEVERLY HILLS FL 34465

Title CHARIPERSON
Name HOOPER, DWIGHT
Address 501 W MAIN ST.
City-State-Zip: INVERNESS FL 34450

Title TREASURER
Name LOCKE, DAVID
Address 4130 S WILLIAM AVE
City-State-Zip: INVERNESS FL 34452

Title SECRETARY
Name JOHN, HEINDEL
Address 1990 W MATCHWOOD DR
City-State-Zip: BEVERLY HILLS FL 34465

Title ASSISTANT SECRETARY &
TREASURER
Name DALY, LINDA
Address 3334 W PEBBLE BEACH CT
City-State-Zip: LECANTO FL 34461

Title VP
Name CASPER, MARK
Address 172 N ESSEX AVE
City-State-Zip: CITRUS HILLS FL 34442

Title COO
Name ENGELKEN, AMY
Address 5436 N. PERSIMMON DR
City-State-Zip: BEVERLY HILLS FL 34465

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: AMY ENGELKEN

COO

02/18/2022

Electronic Signature of Signing Officer/Director Detail

Date