2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2007
Secretary of State

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Entity Name: HABITAT RESTORATION RESOURCES, INC.

Current Principal Place of Business:

17NW 38 PLACE
CAPE CORAL, FL 33993

New Principal Place of Business:

17 NW 38 PLACE
CAPE CORAL, FL 33993

Current Mailing Address:

17 NW 38 PLACE
CAPE CORAL, FL 33993

New Mailing Address:

PO BOX 1267
NOKOMIS, FL 34274

FEI Number: 65-1037432 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

EGAN, LAUREL A
1945 CORAL POINT DRIVE
CAPE CORAL, FL 33990 US

Name and Address of New Registered Agent:

EGAN, LAUREL A
17 NW 38TH PLACE
CAPE CORAL, FL 33993 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: 01/22/2007
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: VD ( ) Delete
Name: EGAN, ROBERT J
Address: 1945 CORAL POINT DRIVE
City-St-Zip: CAPE CORAL, FL 33990

Title: PD ( ) Delete
Name: EGAN, LAUREL A
Address: 1945 CORAL POINT DRIVE
City-St-Zip: CAPE CORAL, FL 33990

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change ( ) Addition
Name: EGAN, ROBERT J
Address: 17 NW 38TH PLACE
City-St-Zip: CAPE CORAL, FL 33993

Title: PD (X) Change ( ) Addition
Name: EGAN, LAUREL A
Address: 17 NW 38TH PLACE
City-St-Zip: CAPE CORAL, FL 33993

Title: T ( ) Change (X) Addition
Name: JOHNS, CHRISTINE M
Address: 613 BARNES PKWY
City-St-Zip: NOKOMIS, FL 34275

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHRISTINE M. JOHNS T 01/22/2007
Electronic Signature of Signing Officer or Director — Date