

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763498

Entity Name: FLORIDA ASSOCIATION OF LOCAL HOUSING FINANCE
AUTHORITIES, INC.**Current Principal Place of Business:**1404 ALBAN AVENUE
TALLAHASSEE, FL 32301**Current Mailing Address:**1404 ALBAN AVENUE
TALLAHASSEE, FL 32301 US**FEI Number: 59-2949126****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**HENDRICKSON, MARK
1404 ALBAN AVENUE
TALLAHASSEE, FL 32301 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	VP
Name	ABBOTT, ANGELA
Address	1404 ALBAN AVENUE
City-State-Zip:	TALLAHASSEE FL 32301

Title	TREASURER
Name	RYAN, JIM
Address	1404 ALBAN AVENUE
City-State-Zip:	TALLAHASSEE FL 32301

Title	ED
Name	HENDRICKSON, MARK
Address	1404 ALBAN AVENUE
City-State-Zip:	TALLAHASSEE FL 32301

Title	PRESIDENT
Name	DRIVER, KATHRYN
Address	1404 ALBAN AVENUE
City-State-Zip:	TALLAHASSEE FL 32301

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: MARK ALLAN HENDRICKSON**EXECUTIVE DIRECTOR****01/25/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date