#### 2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000381

Entity Name: REAL ESTATE, EDUCATION AND COMMUNITY HOUSING, INC.

**FILED** Mar 10, 2025 **Secretary of State** 0648899863CC

### **Current Principal Place of Business:**

8409 NORTH MILITARY TRAIL

STE 112

PALM BEACH GARDENS, FL 33410

### **Current Mailing Address:**

8409 N MILITARY TRAIL

**STE 112** 

PALM BEACH GARDENS, FL 33410 US

FEI Number: 20-4203798 Certificate of Status Desired: No

## Name and Address of Current Registered Agent:

TRACEY, PATRICIA 8409 N MILITARY TRAIL

**STE 112** 

PALM BEACH GARDENS, FL 33410 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: PATRICIA TRACEY 03/10/2025

> Date Electronic Signature of Registered Agent

Officer/Director Detail:

Title CEO. PRESIDENT Title DIRECTOR

Name TRACEY, PATRICIA Name MARTINEZ, ALBERT

8409 N MILITARY TRAIL 8409 N MILITARY TRAIL Address Address **SUITE 112** 

**STE 112** 

City-State-Zip: PALM BEACH GARDENS FL 33410 City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR Title CHAIRMAN

Name M TRACEY, PATRICIA Name TRACEY, RICHARD

Address 8409 N MILITARY TRAIL Address 8409 NORTH MILITARY TRAIL

**STE 112 STE 112** 

City-State-Zip: PALM BEACH GARDENS FL 33410 City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR Title DIRECTOR

GOOD, HARVEY DR. DIEHL, LLOYD BRENT Name Name 8409 NORTH MILITARY TRAIL 4006 S MACDILL AVE Address Address

**STE 112** 

City-State-Zip: **TAMPA FL 33611** City-State-Zip: PALM BEACH GARDENS FL 33410

Title DIRECTOR SECRETARY, TREASURER Title

ROSE, MICHAEL PASTOR Name Name MACCALL, ELIZABETH

8409 NORTH MILITARY TRAIL Address Address 8409 NORTH MILITARY TRAIL **STE 112** 

**STE 112** 

PALM BEACH GARDENS FL 33410 City-State-Zip: PALM BEACH GARDENS FL 33410 City-State-Zip:

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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: PATRICIA TRACEY **PRESIDENT** 03/10/2025

Electronic Signature of Signing Officer/Director Detail

Date

# Officer/Director Detail Continued:

Title DIRECTOR

Name DIAZ, LEONARDO

Address 8409 N MILITARY TRAIL

STE 112

City-State-Zip: PALM BEACH GARDENS FL 33410