2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2025
Secretary of State
2590012963CC

DOCUMENT# N06000002753

Entity Name: HOMEOWNERSHIP FOR ALL, INC.

Current Principal Place of Business:

7025 AUGUSTA NATIONAL DRIVE
ORLANDO, FL 32822-5017

Current Mailing Address:

7025 AUGUSTA NATIONAL DRIVE
ORLANDO, FL 32822-5017 US

FEI Number: 45-3721882

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

WATKINS, JUANA
7025 AUGUSTA NATIONAL DRIVE
ORLANDO, FL 32822-5017 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: JUANA WATKINS 02/06/2025

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	TRUSTEE
Name	CHOY, PHYLLIS
Address	107 WATERBRIDGE LANE
City-State-Zip:	JUPITER FL 33458

Title	TRUSTEE
Name	FIORETTI, BRENDA C
Address	1683 PERSIMMON DRIVE
City-State-Zip:	NAPLES FL 34109

Title	TREASURER
Name	GARRISON, DAVID
Address	7025 AUGUSTA NATIONAL DRIVE
City-State-Zip:	ORLANDO FL 32822-5017

Title	TRUSTEE
Name	GALAVIS, DIANA
Address	4540 SOUTHSIDE BOULEVARD SUITE 1
City-State-Zip:	JACKSONVILLE FL 32216

Title	TRUSTEE
Name	DOOLEY, MICHAEL A.
Address	P.O. BOX 1166
City-State-Zip:	HOBE SOUND FL 33475

Title	TRUSTEE
Name	MONROE, BRAD
Address	509 SOUTH 57TH STREET
City-State-Zip:	TAMPA FL 33619

Title	PRESIDENT
Name	GRANT, MARGY
Address	PO BOX 725025
City-State-Zip:	ORLANDO FL 32872-5025

Title	TRUSTEE
Name	MEADOWS, SHERRI L
Address	PO BOX 3958
City-State-Zip:	OCALA FL 34478

Continues on page 2

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: MARGY GRANT CEO 02/06/2025

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title CHAIRMAN
Name CALDWELL , ROBERT W.
Address 2941 W STATE ROAD 434 #100
City-State-Zip: LONGWOOD FL 32779

Title TRUSTEE
Name BORDEN, TIM
Address P O BOX 725025
City-State-Zip: ORLANDO FL 32872-5025

Title TRUSTEE
Name GURSKE, ADAM
Address 3947 W. NEWBERRY RD
City-State-Zip: GAINESVILLE FL 32607

Title TRUSTEE
Name MCGRAW, MIKE
Address 1400 SOUTH INTERNATIONAL PARKW SUITE 1020
City-State-Zip: LAKE MARY FL 32746

Title TRUSTEE
Name LEE, MICHAEL D.
Address 4895 PLANTERS RIDGE
City-State-Zip: TALLAHASSEE FL 32311

Title TRUSTEE
Name GABBARD, BRANDI
Address 6810 E HILLSBOROUGH AVE
City-State-Zip: TAMPA FL 33610

Title TRUSTEE
Name HILLIARD, BRANDI
Address 3280 W POWERS AVE
City-State-Zip: BELL FL 32619