

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N13000004760

Entity Name: DOWNTOWN NEIGHBORS ALLIANCE, INC.

Current Principal Place of Business:

ROSA M DE LA CAMARA, ESQ.
2525 PONCE DE LEON SUITE 825
CORAL GABLES, FL 33134

Current Mailing Address:

ROSA M DE LA CAMARA, ESQ.
2525 PONCE DE LEON SUITE 825
CORAL GABLES, FL 33134 US

FEI Number: 47-1315285

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

DE LA CAMARA, ROSA M ESQ
2525 PONCE DE LEON SUITE 825
CORAL GABLES, FL 33134 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 PRESIDENT
Name TORRES, JAMES
Address 2525 PONCE DE LEON SUITE 825
City-State-Zip: CORAL GABLES FL 33134

Title VP
Name LEDEZMA, ALEXA
Address 2525 PONCE DE LEON SUITE 825
City-State-Zip: CORAL GABLES FL 33134

Title TREASURER
Name FENTON, MARTIN
Address 2525 PONCE DE LEON SUITE 825
City-State-Zip: CORAL GABLES FL 33134

Title SECRETARY
Name LIM, HELENA MARIA
Address 2525 PONCE DE LEON SUITE 825
City-State-Zip: CORAL GABLES FL 33134

Title AT LARGE
Name BEN-AMI, SHAI
Address 2525 PONCE DE LEON SUITE 825
City-State-Zip: CORAL GABLES FL 33134

Title AT LARGE
Name SULTAN, ZEE
Address 2525 PONCE DE LEON SUITE 825
City-State-Zip: CORAL GABLES FL 33134

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: JAMES TORRES

PRESIDENT

04/30/2024

Electronic Signature of Signing Officer/Director Detail

Date