

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21000013106

Entity Name: THE HOUSING ALLIANCE, INC.

Current Principal Place of Business:

3200 BAILEY LANE, SUITE #109
NAPLES, FL 34105

Current Mailing Address:

3200 BAILEY LANE, SUITE #109
NAPLES, FL 34105 US

FEI Number: 87-3559688

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

PUCHALLA, MICHAEL
3200 BAILEY LANE, SUITE #109
NAPLES, FL 34105 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 CHAIR
Name HRUBY, STEPHEN
Address 3200 BAILEY LANE, SUITE #109
City-State-Zip: NAPLES FL 34105

Title VICE CHAIR
Name DIEGEL, MARY JO
Address 3200 BAILEY LANE, SUITE #109
City-State-Zip: NAPLES FL 34105

Title TREASURER
Name SABIN, TODD
Address 3200 BAILEY LANE, SUITE #109
City-State-Zip: NAPLES FL 34105

Title DIRECTOR
Name BUZZACCO-FOERSTER, JENNA
Address 3200 BAILEY LANE, SUITE #109
City-State-Zip: NAPLES FL 34105

Title DIRECTOR
Name ELLIS, DAVID
Address 3200 BAILEY LANE, SUITE #109
City-State-Zip: NAPLES FL 34105

Title DIRECTOR
Name MCLEOD, MICHELLE
Address 3200 BAILEY LANE, SUITE #109
City-State-Zip: NAPLES FL 34105

Title SECRETARY
Name VALENTI SMITH, CYNTHIA
Address 3200 BAILEY LANE, SUITE #109
City-State-Zip: NAPLES FL 34105

Title DIRECTOR
Name MURPHY, SEAN
Address 3200 BAILEY LANE, SUITE #109
City-State-Zip: NAPLES FL 34105

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: STEPHEN HRUBY

CHAIR

02/08/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR

Name FEDORKO, TARA

Address 3200 BAILEY LANE, SUITE #109

City-State-Zip: NAPLES FL 34105