

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N50264

**Entity Name:** NEIGHBORHOOD LENDING PARTNERS OF FLORIDA, INC.

**Current Principal Place of Business:**

3615 W SPRUCE STREET  
TAMPA, FL 33607

**Current Mailing Address:**

3615 W SPRUCE STREET  
TAMPA, FL 33607 US

**FEI Number:** 59-3138324

**Certificate of Status Desired:** Yes

**Name and Address of Current Registered Agent:**

NRAI  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 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:** AUSHA ARNOLD

02/09/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SVP  
Name FELLOWS, MARY  
Address 3615 WEST SPUCE ST  
City-State-Zip: TAMPA FL 33607

Title P  
Name REYES, DEBRA S.  
Address 3615 WEST SPRUCE STREET  
City-State-Zip: TAMPA FL 33607

Title CHAIRMAN  
Name LAFAVE, K OWEN  
Address PO BOX ONE  
City-State-Zip: TAMPA FL 33601-0001

Title CFOS  
Name RIVAS, CARLOS A  
Address 3615 WEST SPRUCE ST  
City-State-Zip: TAMPA FL 33627

Title VICE CHAIRMAN  
Name RALEY, CLAIRE  
Address 3615 WEST SPRUCE STREET  
City-State-Zip: TAMPA FL 33607

*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:** CARLOS RIVAS

CFO

02/09/2017

Electronic Signature of Signing Officer/Director Detail

Date