113117

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COVER LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: FLORIDA COLLABORATIVE FOR AFFORDABLE HOUSING AND COMMUNINAME of Corporation
Tame of corporation
DOCUMENT NUMBER: N16000000780
The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.
Please return all correspondence concerning this matter to the following:
NATALIE OILABA
NATALIE O'HARA
Name of Contact Person
HOUSING PARTNERSHIP INC
Firm/Company
2001 W BLUE HERON BLVD
Address
RIVIERA BEACH, FL 33404
City/State and Zip Code
NOHARA@CPSFL.ORG
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
NATALIE M O'HARA at (561)841-3500
NATALIE M O'HARA Name of Contact Person at (561)841-3500 Area Code & Daytime Telephone Number

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Amendment Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Street Address:

CR2E045 (04/13)

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	er provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this ange is submitted for a corporation organized under the laws of the State of FLORIDA
	the corporation: FLORIDA COLLABORATIVE FOR AFFORDABLE HOUSING AND COMMU
	l office address: 2001 W BLUE HERON BLVD
3. The mailing a	address (if different):
	poration/qualification: Document number: N13117
5. The name and	d street address of the current registered agent and registered office on file with the rtment of State: (If resigned, enter resigned)
	GREGORY DEMETRIADES (RESIGNED)
	2001 W BLUE HERON BLVD
	RIVIERA BEACH, FL 33404
6. The name and (if changed):	d street address of the new registered agent (if changed) and /or registered office NATALIE O'HARA
	P.O. Box NOT acceptable RIVIERA BEACH, FL 33404
The street addre as changed will	ess of its registered office and the street address of the business office of its registered agent, be identical.
Such change wa authorized by th	as authorized by resolution duly adopted by its board of directors or by an officer so ne board, or the corporation has been notified in writing of the change.
Xignatūr	Kelly Powell, LED Printed or typed name and title
I hereby accept I further agree t of my duties, an locument is beil corporation has	the appointment as registered agent and agree to act in this capacity. to comply with the provisions of all statutes relative to the proper and complete performance ad I am familiar with and accept the obligation of my position as registered agent. Or, if this ng filed merely to reflect a change in the registered office address, I hereby confirm that the s been notified in writing of this change.
	lie O'Hara 5/08/2024
Sign	nature of Registered Agent Date
f signing on bel	half of an entity:
Natal	lie O'Hara
Tv	yped or Printed Name

* * * FILING FEE: \$35.00 * * *

Make Checks payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)