

**2018 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# 757707

**Entity Name:** EAST HILLSBOROUGH HOUSING DEVELOPMENT, INCORPORATED

**Current Principal Place of Business:**

613 S 12TH STREET  
LEESBURG, FL 34748

**Current Mailing Address:**

613 S 12TH STREET  
LEESBURG, FL 34748 US

**FEI Number: 59-2520097**

**Certificate of Status Desired: No**

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

MAGALSKI, BARBARA  
613 S 12TH STREET  
LEESBURG, FL 34748 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            RODOLFO, DANIEL  
Address        72 WESTSIDE DRIVE  
City-State-Zip: PLANT CITY FL 33567

Title            VP  
Name            MARTINEZ, MARCO  
Address        68 WESTSIDE DRIVE  
City-State-Zip: PLANT CITY FL 33567

Title            SECRETARY  
Name            MORALES, LOUIS  
Address        65 WESTSIDE DR  
City-State-Zip: PLANT CITY FL 33567

Title            TREASURER  
Name            ALMENGOR, VILMA  
Address        62 WESTSIDE DR  
City-State-Zip: PLANT CITY FL 33567

Title            DIRECTOR  
Name            NIELO, YAZMIN  
Address        9 WESTSIDE DR  
City-State-Zip: PLANT CITY FL 33567

Title            DIRECTOR  
Name            FRONCO, BERTHA  
Address        52 WESTSIDE DR  
City-State-Zip: PLANT CITY FL 33567

Title            DIRECTOR  
Name            GOMEZ, GRSEL  
Address        40 WESTSIDE DRIVE  
City-State-Zip: PLANT CITY FL 33567

Title            DIRECTOR  
Name            DRAYTON, ADRIANA  
Address        66 WESTSIDE DRIVE  
City-State-Zip: PLANT CITY FL 33567

*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: MARCO MARTINEZ**

**VICE PRESIDENT**

**06/29/2018**

Electronic Signature of Signing Officer/Director Detail

Date