

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N00000000589

**Entity Name:** THE LEVY COUNTY HOUSING AUTHORITY CORE GROUP, INC.

**FILED**  
**Feb 07, 2023**  
**Secretary of State**  
**5850755567CC**

**Current Principal Place of Business:**

4 WEST PARK AVENUE  
CHIEFLAND, FL 32626

**Current Mailing Address:**

4 WEST PARK AVENUE  
SUITE 4  
CHIEFLAND, FL 32626 US

**FEI Number: 59-3656857**

**Certificate of Status Desired: Yes**

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

HOLLAND, CHRISTINA A  
4 WEST PARK AVENUE  
CHIEFLAND, FL 32626 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: CHRISTINA HOLLAND**

**02/07/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title VP  
Name LANGFORD, BRIANA  
Address 4 WEST PARK AVENUE  
SUITE 4  
City-State-Zip: CHIEFLAND FL 32626

Title PRESIDENT  
Name HOLLAND, CHRISTY A  
Address 4 WEST PARK AVENUE  
City-State-Zip: CHIEFLAND FL 32626

Title TREASURER  
Name GUTHRIE, SCOTT  
Address 4 WEST PARK AVENUE  
City-State-Zip: CHIEFLAND FL 32626

Title SECRETARY  
Name ROBINSON, MEYOSHIA  
Address 4 WEST PARK AVENUE  
SUITE 4  
City-State-Zip: CHIEFLAND FL 32626

Title DIRECTOR  
Name MOUNT, ROBERT JR.  
Address 4 WEST PARK AVENUE  
City-State-Zip: CHIEFLAND FL 32626

*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: CHRISTINA HOLLAND**

**PRESIDENT**

**02/07/2023**

Electronic Signature of Signing Officer/Director Detail

Date