## 2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000005099

Entity Name: HBCA FOUNDATION, INC.

**Current Principal Place of Business:** 

1500 W. EAU GALLIE BLVD., STE.A-1

MELBOURNE. FL 32935

## **Current Mailing Address:**

1500 W. EAU GALLIE BLVD., STE. A-2 MELBOURNE, FL 32935 US

FEI Number: 54-2064291 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

THOMAS, JOHN 1500 W EAU GALLIE BLVD MELBOURNE, FL 32935 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: JOHN THOMAS 01/12/2023

Electronic Signature of Registered Agent

Officer/Director Detail:

Title **PRESIDENT** Title 1ST VP

DIBELLA, ROBERT JAFFE, MICHAEL Name Name

SUITE A2 Address SUITE A2 Address

City-State-Zip: MELBOURNE FL 32935 MELBOURNE FL 32935 City-State-Zip:

Title **SECRETARY** Title 2ND VP

Name KUNDE, KERRIE Name WILLIAMS, MASON

Address STE. A-2 Address SUITE A2

MELBOURNE FL 32935 City-State-Zip: City-State-Zip: MELBOURNE FL 32935

PAST PRESIDENT Title Title **TREASURER** Name SLATE, CHRISTINA Name JOHNSON, NEAL

Address SUITE A2 Address STE. A-2

City-State-Zip: MELBOURNE FL 32935 MELBOURNE FL 32935 City-State-Zip:

Title CEO Title PAST 2ND VP

Name THOMAS, JOHN MCCARTHY, ANDREA Name

Address SUITE A2 Address SUITE A2

City-State-Zip: MELBOURNE FL 32935 MELBOURNE FL 32935 City-State-Zip:

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.

01/12/2023 CEO SIGNATURE: JOHN THOMAS

**FILED** Jan 12, 2023

**Secretary of State** 

3468633510CC

Date