

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

DOCUMENT# N15000005577

**FILED**  
**Apr 10, 2023**  
**Secretary of State**  
**8063754768CC**

**Entity Name:** HOUSING AUTHORITY OF THE CITY OF NEW SMYRNA BEACH, CORP

**Current Principal Place of Business:**

1101 S. DIXIE FREEWAY  
NEW SMYRNA BEACH, FL 32168

**Current Mailing Address:**

1101 S. DIXIE FREEWAY  
NEW SMYRNA BEACH, FL 32168

**FEI Number:** 59-6002663

**Certificate of Status Desired:** No

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

POPE, TERESA L.  
1101 S. DIXIE FREEWAY  
NEW SMYRNA BEACH, FL 32168 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:** TERESA POPE

04/10/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title CR  
Name WALKER, ROSEMARY  
Address 3329 CERRO AVENUE  
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title VC  
Name SLOAN, REGIS  
Address 40 LAKE FAIRGREEN CIRCLE  
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title MR  
Name FOLDY, TIM  
Address 473 WHITE CORAL LANE  
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title M  
Name MILLER, GROVER  
Address 500 BROOKS STREET #7  
City-State-Zip: NEW SMYRNA BEACH FL 32168

Title MS  
Name REIKER, JUDY  
Address 464 BOUCHELLE DRIVE  
304  
City-State-Zip: NEW SMYRNA BEACH FL 32169

Title EXECUTIVE DIRECTOR  
Name POPE, TERESA L.  
Address 1101 S. DIXIE FREEWAY  
City-State-Zip: NEW SMYRNA BEACH FL 32168

*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:** TERESA POPE

**EXECUTIVE DIRECTOR**

04/10/2023

Electronic Signature of Signing Officer/Director Detail

Date