

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N20000000146

**Entity Name:** HOUSING ECONOMIC LIVING PROGRAM, INC.

**Current Principal Place of Business:**

2608 CALVANO DR  
LAND O LAKES, FL 34639

**Current Mailing Address:**

2608 CALVANO DR  
LAND O LAKES, FL 34639

**FEI Number: NOT APPLICABLE**

**Certificate of Status Desired: No**

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

MELENDEZ, OSCAR A  
2608 CALVANO DR  
LAND O LAKES, FL 34639 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 MGR  
Name MELENDEZ, OSCAR A  
Address 2608 CALVANO DR  
City-State-Zip: LAND O LAKES FL 34639

Title P  
Name DELGADO, GINA M  
Address 2608 CALVANO DR  
City-State-Zip: LAND O LAKES FL 34639

Title MGR  
Name LOPEZ, JORGE  
Address 7503 N TAMPANIA AVE  
City-State-Zip: TAMPA FL 33614

Title MGR  
Name ROJAS HERNADEZ, ALEXANDRA  
Address 8454 SANDY BEACH ST  
City-State-Zip: TAMPA FL 33634

Title MGR  
Name MELENDEZ, OSCAR ALFREDO SR.  
Address 2608 CALVANO DR  
City-State-Zip: LAND O LAKES FL 34639

*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: OSCAR MELENDEZ**

**MGR**

**03/21/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date