

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21000001039

Entity Name: NEIGHBORHOOD PBS, INC**Current Principal Place of Business:**1499 S. FEDERAL HWY
UNIT 232
BOYNTON BEACH, FL 33435**Current Mailing Address:**1499 S. FEDERAL HWY
UNIT 232
BOYNTON BEACH, FL 33435 60**FEI Number:** 86-3189187**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**STRONGHOLD CAPITAL PBG
1499 S FEDERAL HWY
UNIT 232
BOYNTON BEACH, FL 33435 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	P, DIRECTOR
Name	WILLIAMS, SHELDON
Address	1499 S. FEDERAL HWY, UNIT 232
City-State-Zip:	BOYNTON BEACH FL 33435

Title	VP, DIRECTOR
Name	WILLIAMS, VERNITA
Address	1499 S. FEDERAL HWY, UNIT 232
City-State-Zip:	BOYNTON BEACH FL 33435

Title	T
Name	HOUSTON, NOAH
Address	1499 S. FEDERAL HWY, UNIT 232
City-State-Zip:	BOYNTON BEACH FL 33435

Title	S
Name	WALKER, SUAVE R. DR.
Address	1499 S. FEDERAL HWY UNIT 232
City-State-Zip:	BOYNTON BEACH FL 33435

Title	DIRECTOR
Name	WINSTON, GREGORY
Address	1499 S. FEDERAL HWY UNIT 232
City-State-Zip:	BOYNTON BEACH FL 33435

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: SHELDON WILLIAMS**PRESIDENT****08/15/2023**_____
Electronic Signature of Signing Officer/Director Detail_____
Date