

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22000009145

Entity Name: HOMELESS 2 OWNERSHIP INC.**Current Principal Place of Business:**4255 58TH AVE
VERO BEACH, FL 32967**Current Mailing Address:**4255 58TH AVE
VERO BEACH, FL 32967 US**FEI Number:** 88-3680332**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**BRADLEY, MONICA PATRECE
4255 58TH AVE
VERO BEACH, FL 32967 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:** MONICA P. BRADLEY

04/05/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, CEO, DIRECTOR
Name BRADLEY, MONICA PATRECE
Address 4255 58TH AVE
City-State-Zip: VERO BEACH FL 32967

Title DIRECTOR
Name SILVESTRI, DAN
Address 3507 KIRBY LOOP ROAD
City-State-Zip: FORT PIERCE FL 34981

Title DIRECTOR
Name CITRON, ALMA
Address 4430 23RD WAY
City-State-Zip: VERO BEACH FL 32966

Title DIRECTOR, SECRETARY,
TREASURER
Name BISHOP, ELAINE
Address 5615 93RD PL.
UNIT 9
City-State-Zip: SEBASTIAN FL 32958

Title DIRECTOR
Name WAWRIN, LINDA
Address 1455 90TH AVE
LOT 88
City-State-Zip: VERO BEACH FL 32966

Title DIRECTOR
Name HAGERTY, KATHY
Address 2510 LANGROVE LN. SW
City-State-Zip: VERO BEACH FL 32962

Title DIRECTOR
Name LEWIS, TAMRA
Address 1455 90TH AVE
LOT A57
City-State-Zip: VERO BEACH FL 32966

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: MONICA PATRECE BRADLEY

PRESIDENT

04/05/2023

Electronic Signature of Signing Officer/Director Detail

Date