2023 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L09000078404

Entity Name: MADISON HOUSING INVESTORS LLC

Current Principal Place of Business:

120 FORBES BLVD. SUITE 180 MANSFIELD, MA 02048-1150

Current Mailing Address:

120 FORBES BLVD. SUITE 180 MANSFIELD, MA 02048-1150 US

FEI Number: 27-0734604

Name and Address of Current Registered Agent:

MCDONOUGH, BRIAN ESQ. 150 W. FLAGLER STREET MUSEUM TOWER, STE. 2200 MIAMI, FL 33130 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.

The above harred entity submits this statement for the purpose of changing its registered once of registered agent, or both, in the state of Pionda.				
SIGNATURE	BRIAN MCDONOUGH ESQ.			03/06/2023
	Electronic Signature of Registered Agent			Date
Authorized I	Person(s) Detail :			
Title	MANAGER	Title	VP, AUTHORIZED MEMBER	
Name	THE GATEHOUSE GROUP, INC.	Name	CANEPARI, DAVID J	
Address	120 FORBES BLVD. SUITE 180	Address	120 FORBES BLVD. SUITE 180	
City-State-Zip:	MANSFIELD MA 02048-1150	City-State-Zip:	MANSFIELD MA 02048-1150	
Title	PRESIDENT, AUTHORIZED MEMBER	Title	AUTHORIZED REPRESENTATI	VE
Name	PLONSKIER, MARC S	Name	O'BRIEN, COLEEN D	
Address	120 FORBES BLVD. SUITE 180	Address	120 FORBES BLVD. SUITE 180	
City-State-Zip:	MANSFIELD MA 02048-1150	City-State-Zip:	MANSFIELD MA 02048-1150	
Title	TREASURER	Title	AUTHORIZED REPRESENTATI	VE
Name	YORKSHAITIS, ROGER	Name	LEONARDO, CHRISTOPHER	
Address	120 FORBES BLVD. SUITE 180	Address	120 FORBES BLVD. SUITE 180	
City-State-Zip:	MANSFIELD MA 02048-1150	City-State-Zip:	MANSFIELD MA 02048-1150	
Title	AUTHORIZED REPRESENTATIVE			
Name	LEO, JENNIFER S			
Address	120 FORBES BLVD. SUITE 180			
City-State-Zip:	MANSFIELD MA 02048-1150			

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

PRESIDENT

SIGNATURE: MARC S PLONSKIER

Electronic Signature of Signing Authorized Person(s) Detail

FILED Mar 06, 2023 Secretary of State 6628300202CC

Certificate of Status Desired: No

03/06/2023 Date