

**2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F95000002862

**FILED**  
**Jan 03, 2024**  
**Secretary of State**  
**6659270779CC**

**Entity Name:** NEIGHBORHOOD ASSISTANCE CORPORATION OF AMERICA

**Current Principal Place of Business:**

225 CENTRE STREET  
SUITE 100  
BOSTON , MA 02119

**Current Mailing Address:**

225 CENTRE STREET  
SUITE 100  
BOSTON , MA 02119 US

**FEI Number:** 04-3244616

**Certificate of Status Desired:** No

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

REGISTERED AGENTS LEGAL SERVICES, LLC  
155 OFFICE PLAZA DR.  
SUITE A  
TALLAHASSEE, FL 32301 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:** MICHAEL W. ASHLEY

01/03/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            MARKS, BRUCE  
Address        225 CENTRE STREET  
                  SUITE 100  
City-State-Zip: BOSTON MA 02119

Title            SEC  
Name            LANDRAU-PIRAZZI, MARISSA  
Address        225 CENTRE STREET  
                  SUITE 100  
City-State-Zip: BOSTON MA 02119

Title            TRS  
Name            LLOYD, GLYNN  
Address        225 CENTRE STREET  
                  SUITE 100  
City-State-Zip: BOSTON MA 02119

Title            DIR  
Name            MOTEN, LINDA  
Address        225 CENTRE STREET  
                  SUITE 100  
City-State-Zip: BOSTON MA 02119

Title            DIRECTOR  
Name            FIERBERG, DOUGLAS  
Address        225 CENTRE STREET  
                  SUITE 100  
City-State-Zip: BOSTON MA 02119

Title            DIRECTOR  
Name            LLOYD , GLYNN  
Address        225 CENTRE STREET  
                  SUITE 100  
City-State-Zip: BOSTON MA 02119

Title            DIRECTOR  
Name            MARKS, BRUCE  
Address        225 CENTRE STREET  
                  SUITE 100  
City-State-Zip: BOSTON MA 02119

Title            DIRECTOR  
Name            HUBBARD, TANISHA  
Address        3824 WEST SLIGH AVENUE  
                  -  
City-State-Zip: TAMPA, FL FL 33614

*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:** MARISSA LANDRAU-PIRAZZI

**SECRETARY/CLERK**

01/03/2024

Electronic Signature of Signing Officer/Director Detail

Date