

2024 FOREIGN NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P29443

Entity Name: OXFAM-AMERICA, INC.**Current Principal Place of Business:**77 NORTH WASHINGTON STREET
SUITE 500
BOSTON, MA 02114**Current Mailing Address:**77 NORTH WASHINGTON STREET
SUITE 500
BOSTON, MA 02114 US**FEI Number:** 23-7069110**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BROWN, MS. STACY DANIEL
110 SHEPHERD TRAIL
LONGWOOD, FL 32752-0632 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 PRESIDENT
Name MAXMAN, ABBY
Address 77 NORTH WASHINGTON STREET
 SUITE 500
City-State-Zip: BOSTON MA 02114

Title TREASURER
Name HAMILTON, JOE
Address 77 NORTH WASHINGTON STREET
 SUITE 500
City-State-Zip: BOSTON MA 02114

Title CHAIRMAN
Name SHACHOY, JAMEY
Address 77 NORTH WASHINGTON STREET
 SUITE 500
City-State-Zip: BOSTON MA 02114

Title VC
Name JAYAWICKRAMA, SHERINE
Address 77 NORTH WASHINGTON STREET
 SUITE 500
City-State-Zip: BOSTON MA 02114

Title CFO, ASST. TREASURER
Name CRONAN, CYNTHIA
Address 77 NORTH WASHINGTON STREET
 SUITE 500
City-State-Zip: BOSTON MA 02114

Title SECRETARY
Name REGAN, JACK
Address 77 NORTH WASHINGTON STREET
 SUITE 500
City-State-Zip: BOSTON MA 02114

Title DIRECTOR
Name ALT, MARGIE
Address 77 NORTH WASHINGTON STREET
 SUITE 500
City-State-Zip: BOSTON MA 02114

Title DIRECTOR
Name BEBBINGTON, TONY
Address 77 NORTH WASHINGTON STREET
 SUITE 500
City-State-Zip: BOSTON MA 02114

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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: ABBY MAXMAN

PRESIDENT

03/03/2024

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	JOHNSON, LIONEL
Address	77 NORTH WASHINGTON STREET SUITE 500
City-State-Zip:	BOSTON MA 02114