

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N11000010899

**FILED**  
**Apr 30, 2015**  
**Secretary of State**  
**CC5013248535**

**Entity Name:** A NEW DIRECTION FOR WOMEN & MEN, INC.

**Current Principal Place of Business:**

2365 5TH AVE N  
ST. PETERSBURG, FL 33713

**Current Mailing Address:**

2365 5TH AVE N  
ST. PETERSBURG, FL 33713 US

**FEI Number:** 45-3863121

**Certificate of Status Desired:** No

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

MAGNUS FLAWS & CO, CPA'S. P.A.  
202 CRYSTAL GROVE BLVD  
LUTZ, FL 33548 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  
Name BURSON, CHARLES  
Address 936 5TH ST., N  
City-State-Zip: ST PETERSBURG FL 33701

Title VP  
Name STAMM, SARI  
Address 556 PLAZA SEVILLA CT.  
A106  
City-State-Zip: TREASURE ISLAND FL 33706

Title SECRETARY  
Name ZUPAN, CARLA  
Address 112 LIME ST.  
City-State-Zip: CLEARWATER FL 33756

Title TREASURER  
Name PELHAM, EDDIE  
Address 2365 5TH AVE N  
City-State-Zip: ST. PETERSBURG FL 33713

Title CEO  
Name DIXON, PAMELA  
Address 2365 5TH AVE N  
City-State-Zip: ST. PETERSBURG FL 33713

*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:** PAMELA DIXON

**CEO**

**04/30/2015**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date