

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000002805

Entity Name: THE SANCTUARY OF SOUTHWEST FLORIDA, INC.**Current Principal Place of Business:**4810 HICKORY WOOD DRIVE
NAPLES, FL 34119**Current Mailing Address:**4810 HICKORY WOOD DRIVE
NAPLES, FL 34119**FEI Number:** 46-5195148**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BECKERS, YOLANDA
4810 HICKORY WOOD DRIVE
NAPLES, FL 34119 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 SECRETARY
Name JORDAN, PATRICIA
Address 407B MEADOWLARK LANE
City-State-Zip: NAPLES FL 34105

Title CHAIRMAN
Name BECKERS, YOLANDA NICOLE
Address 4810 HICKORY WOOD DRIVE
City-State-Zip: NAPLES FL 34119

Title DIRECTOR
Name PAEZ, DANIELLE
Address 4810 HICKORY WOOD DRIVE
City-State-Zip: NAPLES FL 34119

Title VP
Name GUTIERREZ, FLORIE
Address 12811 STARLING DR
City-State-Zip: ODESSA FL 33556

Title TREASURER
Name KASHYAP, KRISTINA
Address 6031 SHADY OAKS LN, NAPLES, FL
City-State-Zip: NAPLES FL 34119

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: YOLANDA BECKERS

CHAIRMAN

02/10/2022

Electronic Signature of Signing Officer/Director Detail_____
Date