

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17000010844

Entity Name: NWFL ENCOUNTERS, INC.**Current Principal Place of Business:**1707 DADS RD
BAKER, FL 32531**Current Mailing Address:**1707 DADS RD
BAKER, FL 32531 US**FEI Number: 82-3482084****Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SHAWN HARTZ, MATTHEW
1707 DADS RD
BAKER, FL 32531 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	D
Name	SHAWN HARTZ, MATTHEW
Address	1707 DADS RD
City-State-Zip:	BAKER FL 32531

Title	AD
Name	BROWN HARTZ, SUSAN
Address	1707 DADS RD
City-State-Zip:	BAKER FL 32531

Title	AD
Name	WAYNE NESTLE, ROBERT
Address	5108 BRADFORD DR
City-State-Zip:	PACE FL 32571

Title	AD
Name	MARIE NESTLE, DIANNE
Address	5108 BRADFORD DR
City-State-Zip:	PACE FL 32571

Title	AR
Name	PAUL WARD, DONALD
Address	1325 LEE AVE
City-State-Zip:	BAKER FL 32531

Title	AR
Name	MARIE WARD, ANGELA
Address	1325 LEE AVE
City-State-Zip:	BAKER FL 32531

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: MATTHEW SHAWN HARTZ**DIRECTOR****01/15/2020**_____
Electronic Signature of Signing Officer/Director Detail_____
Date