2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25937

Entity Name: GUARDIANS FOR NEW FUTURES, INC.

Current Principal Place of Business:

1860 SW FOUNTAINVIEW BLVD.

SUITE 200

PORT ST LUCIE, FL 34986

Current Mailing Address:

1860 SW FOUNTAINVIEW BLVD.

SUITE 200

PORT ST LUCIE, FL 34986 US

FEI Number: 65-0117004 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BUTLER, DEBRA P 776 SW MUNJACK CIRCLE PORT ST. LUCIE, FL 34986 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:

Title

Electronic Signature of Registered Agent

Date

FILED Apr 13, 2020

Secretary of State

0754833102CC

Officer/Director Detail:

PRESIDENT Title Title DIRECTOR BUTLER. DEBBIE Name Name PLYM. DORIS

Address 1860 SW FOUNTAINVIEW BLVD. Address 300 HARBOUR DRIVE UNIT 501C

City-State-Zip:

SUITE 200

PORT ST LUCIE FL 34986 City-State-Zip:

Title DIRECTOR Title VΡ

Name CHASTAIN, LINDA GARZA, ERIC Name

10741 GREY HERON COURT Address 3577 SW CORPORATE PARKWAY Address

City-State-Zip: PORT ST LUCIE FL 34986 City-State-Zip: PALM CITY FL 34990

Title **DIRECTOR**

DIRECTOR Name MCGARRY, ROWAN GOMEZ, AMPARO Name

Address 1860 SW FOUNTAINVIEW BLVD.

Address 855 SW ROCKY BAYOU TERRACE SUITE 200

City-State-Zip: PORT ST LUCIE FL 34986 City-State-Zip: PORT ST LUCIE FL 34986

Title DIRECTOR Title **DIRECTOR**

Name STROMAK, RUTH Name RIALS, BRANDI DR.

1860 SW FOUNTAINVIEW BLVD. Address 345 JUPITER LAKES BLVD. Address

SUITE 200 SUITE 302

City-State-Zip: PORT ST LUCIE FL 34986 JUPITER FL 33458 City-State-Zip:

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VERO BEACH FL 32963

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.

04/13/2020 SIGNATURE: DEBBIE BUTLER **PRESIDENT**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR
Name FLOYD, LISA

Address 1901 S. HEADER CANAL ROAD

City-State-Zip: PORT ST. LUCIE FL 34945

Title DIRECTOR

Name ERICE, KRISTINE

Address 1860 SW FOUNTAINVIEW BLVD.

SUITE 200

City-State-Zip: PORT ST LUCIE FL 34986

Title DIRECTOR

Name MALIK, DOROTHY

Address 1860 SW FOUNTAINVIEW BLVD.

SUITE 200

City-State-Zip: PORT ST LUCIE FL 34986