

2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N25937

Entity Name: GUARDIANS FOR NEW FUTURES, INC.

Current Principal Place of Business:

8561 S. COMMERCE CENTRE DRIVE
PORT ST LUCIE, FL 34986

Current Mailing Address:

8561 S. COMMERCE CENTRE DRIVE
PORT ST LUCIE, FL 34986 US

FEI Number: 65-0117004

Certificate of Status Desired: No

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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name BUTLER, DEBRA
Address 8561 S. COMMERCE CENTRE DRIVE
City-State-Zip: PORT ST. LUCIE FL 34986

Title DIRECTOR
Name PLYM, DORIS
Address 300 HARBOUR DRIVE UNIT 501C
City-State-Zip: VERO BEACH FL 32963

Title VP
Name GARZA, ERIC
Address 3577 SW CORPORATE PARKWAY
City-State-Zip: PALM CITY FL 34990

Title DIRECTOR
Name CHASTAIN, LINDA
Address 10741 GREY HERON COURT
City-State-Zip: PORT ST LUCIE FL 34986

Title DIRECTOR
Name GOMEZ, AMPARO
Address 855 SW ROCKY BAYOU TERRACE
City-State-Zip: PORT ST LUCIE FL 34986

Title DIRECTOR
Name MCGARRY, ROWAN
Address 8561 S. COMMERCE CENTRE DRIVE
City-State-Zip: PORT ST LUCIE FL 34986

Title DIRECTOR
Name RIALS, BRANDI DR.
Address 345 JUPITER LAKES BLVD.
 SUITE 302
City-State-Zip: JUPITER FL 33458

Title SECRETARY
Name STROMAK, RUTH
Address 8561 S. COMMERCE CENTRE DRIVE
City-State-Zip: PORT ST LUCIE FL 34986

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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: DEBRA BUTLER

PRESIDENT

07/13/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name MALIK, DOROTHY
Address 8561 S. COMMERCE CENTRE DRIVE
City-State-Zip: PORT ST LUCIE FL 34986

Title DIRECTOR
Name MORGAVERO, SUZANNE
Address 8561 S. COMMERCE CENTRE DRIVE
City-State-Zip: PORT ST LUCIE FL 34986

Title DIRECTOR
Name ZUNIGA, WENDY
Address 8561 S. COMMERCE CENTRE DRIVE
City-State-Zip: PORT ST LUCIE FL 34986

Title DIRECTOR
Name ROSMAN, ANDREW PHD
Address 3301 COLLEGE AVENUE
City-State-Zip: FORT LAUDERDALE FL 33314

Title TREASURER
Name HAHN, LAUREN
Address 1860 SW FOUNTAINVIEW BLVD.
SUITE 200
City-State-Zip: PORT ST. LUCIE FL 34986

Title DIRECTOR
Name JONES, PETER
Address 8561 S. COMMERCE CENTRE DRIVE
City-State-Zip: PORT ST LUCIE FL 34986

Title DIRECTOR
Name NOBILE, BRANDON
Address 201 S 2ND STREET
SUITE 100
City-State-Zip: FORT PIERCE FL 34950