2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25937

Entity Name: GUARDIANS FOR NEW FUTURES, INC.

Current Principal Place of Business:

546 NW UNIVERSITY BLVD

SUITE 203

PORT ST LUCIE, FL 34986

Current Mailing Address:

546 NW UNIVERSITY BLVD

SUITE 203

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 546 NW UNIVERSITY BLVD. SUITE 203

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

FILED Feb 15, 2018

Secretary of State

CC6414235282

Officer/Director Detail:

 Title
 PRESIDENT
 Title
 DIRECTOR

 Name
 BUTLER, DEBBIE
 Name
 PLYM, DORIS

Address 776 S MUNJACK CIRCLE Address 300 HARBOUR DRIVE UNIT 501C

City-State-Zip: PORT SAINT LUCIE FL 34986 City-State-Zip: VERO BEACH FL 32963

Title DIRECTOR Title VP

Name KROEGER, LESLIE M. Name MAYNARD, SHANIEK

Address 2925 PGA BLVD. Address 546 NW UNIVERSITY BLVD.

SUITE 200 SUITE 201

City-State-Zip: PALM BEACH GARDENS FL 33410 City-State-Zip: PORT ST. LUCIE FL 34986

Title TREASURER Title DIRECTOR

Name MORALES, ESPERANZA Name CHASTAIN, LINDA

Address 4800 S. U.S. HIGHWAY 1 Address 546 NW UNIVERSITY BLVD

SUITE 203

City-State-Zip: FORT PIERCE FL 34982 City-State-Zip: PORT ST LUCIE FL 34986

Title SECRETARY Title DIRECTOR

Name PLATT, MELANIE DR. Name GOMEZ, AMPARO

Address 546 NW UNIVERSITY BLVD SUITE 203 Address 546 NW UNIVERSITY BLVD

PORT ST LUCIE FL 34986 SUITE 203

City-State-Zip: PORT ST LUCIE FL 34986 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: DEBBIE BUTLER PRESIDENT 02/15/2018

Officer/Director Detail Continued:

Title DIRECTOR

Name MCGARRY, ROWAN

Address 546 NW UNIVERSITY BLVD

SUITE 203

City-State-Zip: PORT ST LUCIE FL 34986

Title DIRECTOR

Name STROMAK, RUTH

Address 546 NW UNIVERSITY BLVD

SUITE 203

City-State-Zip: PORT ST LUCIE FL 34986

Title DIRECTOR

Name RIALS, BRANDI DR.

Address 546 NW UNIVERSITY BLVD

SUITE 203

City-State-Zip: PORT ST LUCIE FL 34986