

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39014

Entity Name: PHOENIX PROGRAMS OF FLORIDA, INC.**Current Principal Place of Business:**510 VONDERBURG DR.
SUITE 301
BRANDON, FL 33511**Current Mailing Address:**510 VONDERBURG DR.
SUITE 301
BRANDON, FL 33511 US**FEI Number:** 59-3172948**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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, CEO
Name ALVAREZ, MARIA
Address 510 VONDERBURG DR.
 SUITE 301
City-State-Zip: BRANDON FL 33511

Title DIRECTOR
Name GOETSCHUIS, HERBERT
Address 510 VONDERBURG DR.
 SUITE 301
City-State-Zip: BRANDON FL 33511

Title CHAIRMAN
Name MURMAN, SANDRA
Address 510 VONDERBURG DR.
 SUITE 301
City-State-Zip: BRANDON FL 33511

Title DIRECTOR
Name MURRAY, MICHAEL R
Address 510 VONDERBURG DR.
 SUITE 301
City-State-Zip: BRANDON FL 33511

Title DIRECTOR
Name COLLINS, JILL
Address 510 VONDERBURG DR.
 SUITE 301
City-State-Zip: BRANDON FL 33511

Title TREASURER
Name ROVNER, STEVEN
Address 510 VONDERBURG DR.
 SUITE 301
City-State-Zip: BRANDON FL 33511

Title SECRETARY
Name HOLT, JULLIANE
Address SUITE 301
City-State-Zip: BRANDON FL 33511

Title VC
Name HELDFOND, BEN
Address 510 VONDERBURG DR.
 SUITE 301
City-State-Zip: BRANDON FL 33511

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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: MARIA ALVAREZ**PRESIDENT & CEO****01/24/2023**

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name CAPITANO, SR., JOSEPH
Address SUITE 301
City-State-Zip: BRANDON FL 33511

Title DIRECTOR
Name TAYLOR, JAY
Address SUITE 301
City-State-Zip: BRANDON FL 33511

Title DIRECTOR
Name ALLEN, DREW
Address 510 VONDERBURG DR.
SUITE 301
City-State-Zip: BRANDON FL 33511

Title DIRECTOR
Name DEBARTOLO, NIKKI
Address SUITE 301
City-State-Zip: BRANDON FL 33511

Title DIRECTOR
Name COLE, TIFFANY
Address 510 VONDERBURG DR.
SUITE 301
City-State-Zip: BRANDON FL 33511