2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003825

Entity Name: GUARDIAN ANGELS FOR SPECIAL POPULATIONS, INC.

FILED Feb 12, 2019 Secretary of State 9902758551CC

Current Principal Place of Business:

410 SANTA BARBARA BLVD CAPE CORAL, FL 33991

Current Mailing Address:

P.O. BOX 151321

CAPE CORAL, FL 33915

FEI Number: 65-0769068 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

PARK, MELINA 410 SANTA BARBARA BLVD CAPE CORAL, FL 33915 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: MELINA PARK 02/12/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PD Title TD

Name MARCUCCI, VINCENT Name DELANEY, SHARON

Address 845 MONTICELLO COURT Address 4633 WATERSCAPE LANE

City-State-Zip: CAPE CORAL FL 33904 City-State-Zip: FORT MYERS FL 33966

Title VP Title SD

Name HAUGH, MARGIE Name REILLY, CAROL

Address 1124 SW 46TH STREET Address 3822 CHERRYBROOK LOOP

City-State-Zip: CAPE CORAL FL 33914 City-State-Zip: FORT MYERS FL 33966

Title D Title DIRECTOR

Name ZWIRLEIN, LYNETTE Name SANSONE, SARA

Address 229 SW 43RD STREET Address 410 SANTA BARBARA BLVD

City-State-Zip: CAPE CORAL FL 33914 City-State-Zip: CAPE CORAL FL 33915

TitleDIRECTORTitleDIRECTORNameALLEN, GREGNameMILLER, RAY

Address P O BOX 3455 Address 2630 NW 1ST STREET

City-State-Zip: N. FORT MYERS FL 33917 City-State-Zip: CAPE CORAL FL 33993

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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: VINCENT MARCUCCI PRESIDENT 02/12/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name DENMARK, KELLY

Address 3153 REDSTONE CIRCLE
City-State-Zip: N FORT MYERS FL 33917

Title DIRECTOR

Name ELAINE, ELIZABETH
Address 917 SW 20TH STREET

City-State-Zip: CAPE CORAL FL 33991

Title DIRECTOR

Name WILCOX, BARBARA

Address 410 SANTA BARBARA BLVD

City-State-Zip: CAPE CORAL FL 33915