2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003825

Entity Name: GUARDIAN ANGELS FOR SPECIAL POPULATIONS, INC.

FILED
Jan 03, 2020
Secretary of State
3232643858CC

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 01/03/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title PD Title TD

NameSHELDRAKE, MICKNameABRAMS, HEATHERAddress917 SW 20TH STAddress3801 SW 2ND ST

City-State-Zip: CAPE CORAL FL 33991 City-State-Zip: CAPE CORAL FL 33991

Title VP Title SD

Name MILLER, RAY Name REILLY, CAROL

Address 2630 NW 1ST STREET Address 3822 CHERRYBROOK LOOP

City-State-Zip: CAPE CORAL FL 33993 City-State-Zip: FORT MYERS FL 33966

Title D Title DIRECTOR

Name DELANEY, SHARON Name PARK, MELINA

Address 4633 WATERSCAPE LANE Address 2609 SW 38TH STREET

City-State-Zip: FORT MYERS FL 33966 City-State-Zip: CAPE CORAL FL 33993

Title DIRECTOR Title DIRECTOR

Name ALLEN, GREG Name GERMAIN, DONNA

Address P O BOX 3455 Address 410 SASNTA BARBARA

City State 7in CARE CORAL FL 33001

City-State-Zip: N. FORT MYERS FL 33917 City-State-Zip: CAPE CORAL FL 33991

Continues on page 2

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: HEATHER ABRAMS TREASURER 01/03/2020

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