

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 726365

**FILED**  
**Jan 05, 2011**  
**Secretary of State**

**Entity Name:** NEW HORIZONS OF NORTHWEST FLORIDA, INC.

**Current Principal Place of Business:**

10050 HILLVIEW DRIVE  
PENSACOLA, FL 32514

**New Principal Place of Business:**

**Current Mailing Address:**

10050 HILLVIEW DRIVE  
PENSACOLA, FL 32514

**New Mailing Address:**

**FEI Number:** 59-0578643

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

GONGORA, GENE A  
10050 HILLVIEW DRIVE  
PENSACOLA, FL 32514 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GIBBS, RICHARD  
Address: 7945 BEULAH ROAD  
City-St-Zip: PENSACOLA, FL 32526

Title: PD  
Name: EDDINS, DANNY M  
Address: PO BOX 10330  
City-St-Zip: PENSACOLA, FL 32524

Title: TD  
Name: NELSON, CHARLES E  
Address: 280 MAN O' WAR CIRCLE  
City-St-Zip: CANTONMENT, FL 32533

Title: SD  
Name: BAILEY, GERRIE  
Address: JAMESTOWN APTS 3331 SUMMIT BLVD 154  
City-St-Zip: PENSACOLA, FL 32503

Title: D  
Name: MOULTON, BOB  
Address: 380 LURTON STREET  
City-St-Zip: PENSACOLA, FL 32505

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: RICHARD GIBBS

PD

01/05/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date