

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 768196

**FILED**  
**Apr 11, 2012**  
**Secretary of State**

**Entity Name:** NEW HORIZONS FOUNDATION, INC.

**Current Principal Place of Business:**

3945 NW 27 AVE  
BOCA RATON, FL 334344436

**New Principal Place of Business:**

**Current Mailing Address:**

3945 NW 27 AVE  
BOCA RATON, FL 334344436

**New Mailing Address:**

**FEI Number:** 59-2358447

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BOVARNICK, BENNETT  
3945 NW 27 AVE.  
BOCA RATON, FL 334344436 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: MASTIN, DEBORAH B.  
Address: 111 NW 1ST ST #2810  
City-St-Zip: MIAMI, FL

Title: SD  
Name: SAUNDERS, MARCIA  
Address: 520 NE 93RD ST  
City-St-Zip: MIAMI SHORES, FL 33138

Title: D  
Name: PRICE-WILLIAMS, ABIGAIL  
Address: 111 N.W. 1ST ST. #2810  
City-St-Zip: MIAMI, FL

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: DEBORAH B. MASTIN

PD

04/11/2012

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

\_\_\_\_\_  
Date