

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000001409

FILED  
Jan 07, 2009  
Secretary of State

Entity Name: NEW FRONTIER'S HEALTH FORCE, INC.

## Current Principal Place of Business:

1684 BELCHER RD. N  
CLEARWATER, FL 33765

## New Principal Place of Business:

## Current Mailing Address:

1684 BELCHER RD. N  
CLEARWATER, FL 33765

## New Mailing Address:

P.O. BOX 8331  
CLEARWATER, FL 33758

FEI Number: 59-3499998

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

HAWTHORNE, TONYA  
2237 CYPRESS POINT DR. E  
CLEARWATER, FL 33763 US

## Name and Address of New Registered Agent:

HAWTHORNE, TONYA DR.  
2237 CYPRESS POINT DR. E  
CLEARWATER, FL 33763 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: DR. TONYA HAWTHORNE

01/07/2009

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: VP ( ) Delete  
Name: SATTINGER, TIM  
Address: 1913 CARDAMON DR.  
City-St-Zip: TRINITY, FL 34655

Title: T ( ) Delete  
Name: ALBERT, GEORGE  
Address: 2175 BEECHER RD.  
City-St-Zip: CLEARWATER, FL 33763

Title: BM ( ) Delete  
Name: ELLIS, LINDA  
Address: 3452 KEENE LAKE DR  
City-St-Zip: LARGO, FL 33771

Title: PD ( ) Delete  
Name: HAWTHORNE, TONYA  
Address: 2237 CYPRESS PT DR EAST  
City-St-Zip: CLEARWATER, FL 33763

Title: BM ( ) Delete  
Name: BUTLER, LORI  
Address: 796 PINEWOOD DR  
City-St-Zip: DUNEDIN, FL 34698

Title: BM ( ) Delete  
Name: BOWMAN, BOB  
Address: 1833 LAKE CYPRESS DR  
City-St-Zip: SAFETY HARBOR, FL 34695

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition  
Name: BOWMAN, BOB  
Address: 100 WOODBURN CT.  
City-St-Zip: SAFETY HARBOR, FL 34695

Title: S (X) Change ( ) Addition  
Name: BUTLER, LORI  
Address: 796 PINEWOOD DR.  
City-St-Zip: DUNEDIN, FL 34698

Title: T (X) Change ( ) Addition  
Name: ELLIS, LINDA  
Address: 3452 KEENE LAKE DR  
City-St-Zip: LARGO, FL 33771

Title: PD (X) Change ( ) Addition  
Name: HAWTHORNE, TONYA DR.  
Address: 2237 CYPRESS PT DR EAST  
City-St-Zip: CLEARWATER, FL 33763

Title: BM (X) Change ( ) Addition  
Name: GREEN, CATHY  
Address: 6836 9TH AVE., N.  
City-St-Zip: ST. PETERSBURG, FL 33710

Title: BM (X) Change ( ) Addition  
Name: SATTINGER, TIM  
Address: 1913 CARDAMON DR.  
City-St-Zip: TRINITY, FL 34655

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: DR. TONYA HAWTHORNE

PD

01/07/2009

Electronic Signature of Signing Officer or Director

Date