

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001322

Entity Name: NEW HORIZONS OF SOUTHWEST FLORIDA, INC.**Current Principal Place of Business:**25300 BERNWOOD DR STE 7
BONITA SPRINGS, FL 34135**Current Mailing Address:**P.O. BOX 111833
NAPLES, FL 34108 US**FEI Number:** 11-3678086**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CUNNING, LINDA M
10801 CROOKED RIVER RD #103
BONITA SPRINGS, FL 34135 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name NICHOLS, ROBERT VCAPT.
Address 181 7TH ST.
City-State-Zip: BONITA SPRINGS FL 34134

Title DIRECTOR
Name NICHOLS, ELLEN Q
Address 181 7TH ST.
City-State-Zip: BONITA SPRINGS FL 34134

Title DIRECTOR
Name SHELLNBARGER, DAVID
Address 4801 BONITA BAY BLVD. PH 202
City-State-Zip: BONITA SPRINGS FL 34134

Title CHAIRMAN OF THE BOARD
Name MCCANN, WEST
Address 26790 SOUTH TAMIAMI
City-State-Zip: BONITA SPRINGS FL 34134

Title TREASURER, DIRECTOR
Name LABELLE, STEVE
Address 8751 ESTERO BLVD., #802
City-State-Zip: FORT MYERS BEACH FL 33931

Title DIRECTOR
Name FINCH, DEBBIE
Address 10318 GATOR BAY CT.
City-State-Zip: NAPLES FL 34120

Title DIRECTOR
Name MILLER, RON
Address 4951 BONITA BAY BLVD.
#1902
City-State-Zip: BONITA SPRINGS FL 34134

Title DIRECTOR
Name CARLIN, DENISE
Address 2855 COLONIAL BLVD.
City-State-Zip: FORT MYERS FL 33966

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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: LINDA CUNNING

CEO

03/19/2020

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name GARBO, LAURI
Address 1908 FAIRFAX CIRCLE
City-State-Zip: NAPLES FL 34109

Title DIRECTOR
Name CARSON, TIM PASTOR
Address 8088 LORD'S WAY
City-State-Zip: ESTERO FL 33928

Title DIRECTOR
Name CHISHOLM, SANDY
Address 5065 YACHT HARBOR CIRCLE #702
City-State-Zip: NAPLES FL 34112

Title DIRECTOR
Name PILLA, TERRI
Address 4951 BONITA BAY BLVD., PH201
City-State-Zip: BONITA SPRINGS FL 34134

Title CFO
Name BECERRA, LIZ
Address 190 6TH ST
City-State-Zip: BONITA SPRINGS FL 34134

Title DIRECTOR
Name HUNT, EDITH
Address 4951 BONITA BAY BLVD, #1105
City-State-Zip: BONITA SPRINGS FL 34134

Title DIRECTOR
Name ALSEPT, TERRI
Address 26790 S. TAMIAMI TRAIL
City-State-Zip: BONITA SPRINGS FL 34134

Title DIRECTOR
Name PACHECO , EVELYN
Address 26222 MILAGRO LANE
City-State-Zip: BONITA SPRINGS FL 34135

Title CEO
Name CUNNING, LINDA M
Address 10801 CROOKED RIVER RD #103
City-State-Zip: BONITA SPRINGS FL 34135

Title D
Name HALEY, DEBRA
Address 22201 RED LAUREL LN.
City-State-Zip: ESTERO FL 33928