2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22633

Entity Name: OPENING DOORS NORTHWEST FLORIDA (NWFL) INC.

FILED
Jan 26, 2021
Secretary of State
6337059366CC

Current Principal Place of Business:

1020 WEST NEW WARRINGTON ROAD

PENSACOLA, FL 32506

Current Mailing Address:

P.O. BOX 17222

PENSACOLA. FL 32522 US

FEI Number: 59-2909065 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

JOHNSON, JOHN 1020 WEST NEW WARRINGTON ROAD PENSACOLA, FL 32506 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: JOHN JOHNSON 01/26/2021

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title **SECRETARY** Title **PRESIDENT** DONALDSON, SANDRA Name Name WATERS, JIM PH.D. 5300 BERRYHILL RD Address P.O. BOX 17222 Address City-State-Zip: MILTON FL 32570 PENSACOLA FL 32522 City-State-Zip:

Title TREASURER Title CEO

NameMELISSA, STRAUGHNNameJOHNSON, JOHN MPAAddressP.O. BOX 17222Address3207 NORTH PACE BLVDCity-State-Zip:PENSACOLA FL 32505PENSACOLA FL 32505

Title DIRECTOR Title DIRECTOR

NameBARBER, KAREN PH.EDNameDOUMA, DEBBIE PH.EDAddress5086 CANAL STREETAddress1000 COLLEGE BLVDCity-State-Zip:MILTON FL 32570City-State-Zip:PENSACOLA FL 32504

Title DIRECTOR Title DIRECTOR

NameLANZA, JOHN MDNameSIMMONS, DEVINAddress1295 WEST FAIRFIELD DRIVEAddress348 HERMAN STREETCity-State-Zip:PENSACOLA FL 32501City-State-Zip:PENSACOLA FL 32505

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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: JOHN JOHNSON EXECUTIVE DIRECTOR 01/26/2021

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title DIRECTOR

Name KARIHER, JULES

Address 5151 N 9TH AVE

City-State-Zip: PENSACOLA FL 32504

Title DIRECTOR

Name SINGH, ABE PHD

Address 3702 NORTH PACE BLVD

City-State-Zip: PENSACOLA FL 32505

Title DIRECTOR

Name MCCURDY, FRANCES

Address 1020 WEST NEW WARRINGTON ROAD

City-State-Zip: PENSACOLA FL 32506

Title DIRECTOR

Name JOSEPHS, DAVID DR.

Address 1020 NEW WARRINGTON RD

City-State-Zip: PENSACOLA FL 32506

Title DIRECTOR

Name WHITAKER, MARCIE

Address 3702 NORTH PACE BLVD City-State-Zip: PENSACOLA FL 32505

Title DIRECTOR

Name ROBERTS, ANDREA ESQ.

Address P.O. BOX 17222

City-State-Zip: PENSACOLA FL 32522

Title DIRECTOR

Name LYTER, TOMMY

Address 1020 WEST NEW WARRINGTON

ROAD

City-State-Zip: PENSACOLA FL 32506