2021 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N22633

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

FILED
Oct 01, 2021
Secretary of State
0957210203CC

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 10/01/2021

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title **SECRETARY** Title **PRESIDENT** Name PHILLIPS, VANESSA DR. 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

 Name
 RIGGS, CHERYL
 Name
 JOHNSON, JOHN MPA

 Address
 P.O. BOX 17222
 Address
 3207 NORTH PACE BLVD

 City-State-Zip:
 PENSACOLA FL 32522
 City-State-Zip:
 PENSACOLA FL 32505

Title DIRECTOR Title DIRECTOR

NameDOUMA, DEBBIE PH.EDNameWHITAKER, MARCIEAddress1000 COLLEGE BLVDAddress3702 NORTH PACE BLVDCity-State-Zip:PENSACOLA FL 32504City-State-Zip:PENSACOLA FL 32505

Title DIRECTOR Title DIRECTOR

Name SINGH, ABE PHD Name ROBERTS, ANDREA ESQ.

Address 3702 NORTH PACE BLVD Address P.O. BOX 17222

City-State-Zip: PENSACOLA FL 32505 City-State-Zip: PENSACOLA FL 32522

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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

Electronic Signature of Signing Officer/Director Detail

10/01/2021 Date

Officer/Director Detail Continued:

Title DIRECTOR Title DIRECTOR

Name MCCURDY, FRANCES Name WILLHITE, CHAD SGT.

Address 1020 WEST NEW WARRINGTON ROAD Address 1020 WEST NEW WARRINGTON ROAD ROAD

City-State-Zip: PENSACOLA FL 32506

City-State-Zip: PENSACOLA FL 32506

Title DIRECTOR Title DIRECTOR

Name JOSEPHS, DAVID DR. Name ARRINGTON, WALTER

Address 1020 NEW WARRINGTON RD Address 1020 WEST NEW WARRINGTON

City-State-Zip: PENSACOLA FL 32506 ROAD

City-State-Zip: PENSACOLA FL 32506
Title DIRECTOR

Name TRAVIS, MARSHA Title DIRECTOR

Address 1020 WEST NEW WARRINGTON ROAD Name MCKNIGHT, PATTI

City-State-Zip: PENSACOLA FL 32506 Address 1020 WEST NEW WARRINGTON

ROAD

Title DIRECTOR City-State-Zip: PENSACOLA FL 32506

Name MITCHELL, RAYMOND Title DIRECTOR

Address 1020 WEST NEW WARRINGTON ROAD Name SMITH, WHITLEY

City-State-Zip: PENSACOLA FL 32506 Address 1020 WEST NEW WARRINGTON

ROAD

City-State-Zip: PENSACOLA FL 32506