

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N99000005169

**Entity Name:** A NEW GENERATION OF HERNANDO, INC.

**Current Principal Place of Business:**

3027 LANDOVER BOULEVARD  
SPRING HILL, FL 34608

**Current Mailing Address:**

3027 LANDOVER BLVD.,  
SPRING HILL, FL 34608 US

**FEI Number:** 59-3596705

**Certificate of Status Desired:** No

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

BENNETT, CHERYL  
3027 LANDOVER BLVD.,  
SPRING HILL, FL 34608 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:** CHERYL BENNETT

01/24/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, DIRECTOR  
Name            KNIGHT, STEPHANIE  
Address        36547 FRAZEE HILL RD  
City-State-Zip: DADE CITY FL 33523

Title            TREASURER, DIRECTOR  
Name            WILHELM, JAMES M.  
Address        7211 HIAWATHA PARKWAY  
City-State-Zip: SPRING HILL FL 34606

Title            VP, DIRECTOR  
Name            CALLEA, LISA H  
Address        353 ROYAL PALM WAY  
City-State-Zip: SPRING HILL FL 34608

Title            DIRECTOR  
Name            PIDEK, JOHN JR.  
Address        P O BOX 5688  
City-State-Zip: SPRING HILL FL 34611

Title            SECRETARY, DIRECTOR  
Name            CASSARA, FRANK  
Address        9391 BRADY STREET  
City-State-Zip: SPRING HILL FL 34608

Title            DIRECTOR  
Name            FRASER, FRANK  
Address        5042 GENVALIA ROAD  
City-State-Zip: BROOKSVILLE FL 34604

Title            DIRECTOR  
Name            BENNETT, CHERYL  
Address        5125 CEDAR LANE  
City-State-Zip: BROOKSVILLE FL 34601

*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:** CHERYL BENNETT

**DIRECTOR**

01/24/2023

Electronic Signature of Signing Officer/Director Detail

Date