## 2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10000001561

Entity Name: WESTCARE FLORIDA, INC.

**Current Principal Place of Business:** 

1633 POINCIANA DRIVE PEMBROKE PINES. FL 33025

**Current Mailing Address:** 

PO BOX 94738

LAS VEGAS, NV 89193 US

FEI Number: 27-5180625 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

BUSINESS FILINGS INCORPORATED 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324 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: BRENNA LUTTER AST, SECRETARY 03/15/2022

Electronic Signature of Registered Agent Date

Officer/Director Detail:

 Title
 PRESIDENT, CEO
 Title
 TREASURER

 Name
 STEINBERG, RICHARD E
 Name
 ORTBALS, KEN

Address 1711 WHITNEY MESA DRIVE Address 1711 WHITNEY MESA DRIVE
City-State-Zip: HENDERSON NV 89014 City-State-Zip: HENDERSON NV 89014

Title SECRETARY Title DIRECTOR

Name HANNA, JIM Name WALSH, THOMAS II

Address 1711 WHITNEY MESA DRIVE Address 180 28TH AVENUE NORTH

City-State-Zip: HENDERSON NV 89014 City-State-Zip: ST. PETERSBURG FL 33704

Title CHAIRMAN Title DIRECTOR

Name RAMSAY, RICHARD Name WADHAMS, JAMES

Address C/O MONROE COUNTY SHERIFF'S Address BLACK & LOBELLO

OFFICE

5525 COLLEGE ROAD City-State-Zip: LAS VEGAS NV 89135

City-State-Zip: KEY WEST FL 33040

Title DIRECTOR

TitleDIRECTORNameBOAZMAN, DERRICKNameOKADA, MARYAddress1860 BOND DRIVEAddressP.O. BOX 3566City-State-Zip: ATLANTA GA 30315

City-State-Zip: HAGATNA OC 96932

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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: JIM HANNA CORP. SECRETARY 03/15/2022

Electronic Signature of Signing Officer/Director Detail

Date

10777 WEST TWAIN AVE. STE.300

FILED Mar 15, 2022

**Secretary of State** 

5111395043CC

## Officer/Director Detail Continued:

Title DIRECTOR

Name ABADIN, RAMON

Address 9155 S. DADELAND BLVD

**SUITE 1208** 

City-State-Zip: MIAMI FL 33156

Title DIRECTOR, VC

Address

Name HUGHES, MARKUS

City-State-Zip: ST. PETERSBURG FL 33710

3251 70TH WAY NORTH

Title DIRECTOR

Name EKSTROM, WILLIAM

Address 1516 S. PALOMA BLANCA PL.

City-State-Zip: KINGMAN AZ 86401