

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N48083

Entity Name: QUALITY LIFE CENTER OF SOUTHWEST FLORIDA, INC.**Current Principal Place of Business:**3210 DR MARTIN LUTHER KING JR BLVD
FT MYERS, FL 33916**Current Mailing Address:**P.O. DRAWER 1290
FORT MYERS, FL 33902**FEI Number:** 65-0321309**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**EBELINI, MARK
1625 HENDRY STREET
3RD FLOOR
FT MYERS, FL 33901 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:** MARK EBELINI

01/26/2022

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER, DIRECTOR

Name MOES, JEFFREY

Address 8695 COLLEGE PARKWAY
SUITE 100

City-State-Zip: FORT MYERS FL 33919

Title DIRECTOR

Name RUSSELL, STEPHEN

Address 1700 MONROE STREET

City-State-Zip: FORT MYERS FL 33901

Title DIRECTOR

Name SMALLS, SYLVESTER

Address 14750 BEN C PRATT/6 MILE CYPRESS
PARKWAY

City-State-Zip: FORT MYERS FL 33912

Title DIRECTOR

Name HAYDEN, TOM

Address 6216 WHISKEY CREEK DRIVE
#B

City-State-Zip: FORT MYERS FL 33919

Title DIRECTOR

Name COLLINS, MARIE

Address 4501 COLONIAL BOULEVARD

City-State-Zip: FORT MYERS FL 33966

Title DIRECTOR

Name HORTON, J. WEBB

Address 10501 FGCU BOULEVARD SOUTH

City-State-Zip: FORT MYERS FL 33965

Title DIRECTOR

Name NASWORTHY, SUSAN

Address 13000S. CLEVELAND AVENUE

City-State-Zip: FORT MYERS FL 33907

Title DIRECTOR

Name WIEBEL, JANIS

Address 7920 SUMMERLIN LAKES DRIVE

City-State-Zip: FORT MYERS FL 33907

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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: AROL BUNTZMANCHAIRPERSON,
DIRECTOR

01/26/2022

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SPEARS, DIANE
Address 2776 CLEVELAND AVENUE
City-State-Zip: FORT MYERS FL 33901

Title EXECUTIVE DIRECTOR
Name MUHAMMED, ABDUL HAQ
Address P.O. DRAWER 1290
City-State-Zip: FORT MYERS FL 33902

Title CHAIRPERSON, DIRECTOR
Name BUNTZMAN, AROL
Address 4954 LOWELL DRIVE
City-State-Zip: AVE MARIA FL 34142