

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 750077

1. Entity Name

SOUTHWEST FLORIDA ADDICTION SERVICES, INC.

Principal Place of Business

2101 MCGREGOR BLVD.  
FT. MYERS FL 33901

Mailing Address

2101 MCGREGOR BLVD.  
FT. MYERS FL 33901-3411

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1965829

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

HART, LARRY  
2210 PECK ST.  
FT. MYERS FL 33901

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Delete  
NAME GIBBS, ARNOLD  
STREET ADDRESS P. O. BOX 150027 N/A  
CITY-ST-ZIP CAPE CORAL FL 33915

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME ENGLENDOW, MARK  
STREET ADDRESS 12065 METRO PKWY  
CITY-ST-ZIP FORT MYERS FL 33912

TITLE TREASURER ☒ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE P ☐ Delete  
NAME HART, LARRY  
STREET ADDRESS 2210 PECK ST  
CITY-ST-ZIP FT MYERS, FL 00000

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE S ☐ Delete  
NAME HAGAN, CHALES  
STREET ADDRESS 15664 BROMELAI RD.  
CITY-ST-ZIP BOKEELIA FL 33922

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE T ☐ Delete  
NAME ROEPSTORFF, GEOFF  
STREET ADDRESS 4575 VIA ROYALE, SUITE 108  
CITY-ST-ZIP FORT MYERS FL

TITLE Vice President ☒ Change ☐ Addition  
NAME 13000 South Cleveland Ave.  
STREET ADDRESS Fort Myers, FL 33907  
CITY-ST-ZIP

TITLE D ☐ Delete  
NAME PYLE, HOMER  
STREET ADDRESS 846 XAVIER AVE  
CITY-ST-ZIP FT MYERS FL

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*GEOFF ROEPSTORFF* 1/25/00 941 466-1800

FILED  
Feb 01, 2000 8:00 am  
Secretary of State

02-01-2000 90065 007 \*\*\*\*61.25



DO NOT WRITE IN THIS SPACE