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Jan 29 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N48058 (4)

1. Corporation Name

CENTER FOR INDEPENDENT LIVING OF SOUTHWEST FLORIDA, INC.

Principal Place of Business

3626 EVANS AVE.
FT. MYERS FL 33901

Mailing Address

3626 EVANS AVE.
FT. MYERS FL 33901

3. Date Incorporated or Qualified

03/23/1992

4. FEI Number

65-0345103

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MICCICHE, CHARLES J
3626 EVANS AVE.
FT. MYERS FL 33901

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

1.1 TITLE D ☒ DELETE

NAME O'CONNOR, MICHAEL
STREET ADDRESS 8503 STRONGFELLOW RD
CITY-ST-ZIP ST JAMES FL

1.2 TITLE DT ☒ DELETE

NAME FELLERS, KEITH
STREET ADDRESS 910 SW 47TH ST.
CITY-ST-ZIP CAPE CORAL FL 33914

1.3 TITLE D ☐ DELETE

NAME SNOW, MARCUS
STREET ADDRESS 15139 ANCHORAGE WAY
CITY-ST-ZIP FT MYERS FL

1.4 TITLE DP ☐ DELETE

NAME LAWSON, JOHN J
STREET ADDRESS 3984 ARNOLD AVENUE
CITY-ST-ZIP NAPLES FL 33941

1.5 TITLE DS ☒ DELETE

NAME CARTER, AL
STREET ADDRESS 5339 CONGO CT.
CITY-ST-ZIP CAPE CORAL FL 33904

1.6 TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DT ☐ Change ☒ Addition

1.2 NAME TODD JOHNSON
1.3 STREET ADDRESS 8140 College Pkwy.
1.4 CITY-ST-ZIP Ft. Myers, FL 33919

2.1 TITLE DS ☐ Change ☒ Addition

2.2 NAME TUESDAY WARMKA
2.3 STREET ADDRESS 14200 S. Tamiami Trl.
2.4 CITY-ST-ZIP Ft. Myers FL 33912

3.1 TITLE D ☐ Change ☒ Addition

3.2 NAME Glen Sabatka
3.3 STREET ADDRESS 19501 Ben Hill Pkwy.
3.4 CITY-ST-ZIP Ft. Myers, FL 33905

4.1 TITLE D ☐ Change ☒ Addition

4.2 NAME Carol Wilkins
4.3 STREET ADDRESS 8099 College Pkwy. S.W.
4.4 CITY-ST-ZIP Ft. Myers, FL 33906

5.1 TITLE D ☐ Change ☒ Addition

5.2 NAME Tom Puza
5.3 STREET ADDRESS 2149 McGregor Blvd.
5.4 CITY-ST-ZIP Ft. Myers, FL 33901

6.1 TITLE D ☐ Change ☒ Addition

6.2 NAME Roger Angel
6.3 STREET ADDRESS 1617 Hendry St. Suite 405
6.4 CITY-ST-ZIP Ft. Myers FL 33901

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature]

1/5/98

941.277.1447

CR2E037 (10/97)

CENTER FOR INDEPENDENT LIVING
OF SOUTHWEST FLORIDA, INC.

Charles J. Micciche, MA, CAGS
Executive Director

3626 Evans Avenue
Ft. Myers, Florida 33901

Also include the following as additions:

D
Jack Warren
Shady Rest Nursing Home-Ford Unit
2310 N. Airport Rd.
Ft. Myers, Fl 33907

D
Don Geberich
9981 Health Park Circle, Suite 276
Ft. Myers, Fl. 33908