2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N48058

1. Entity Name

CENTER FOR INDEPENDENT LIVING OF SOUTHWEST FLORI

Principal Place of Business

Mailing Address

3626 EVANS AVE. FT. MYERS FL 33901 3626 EVANS AVE. FT. MYERS FL 33901-8313

2. Principal Place of Business	3. Mailing Address	
Suite, Apt. #, etc.	Suite, Apt. #, etc.	
City & State	City & State	-

FILED Feb 20, 2000 8:00 am Secretary of State

02-20-2000 90013 007 ****61.25



Principal Place of Business 3. Mailing Address											
Suite, Apt. #, etc. Suite, Apt. #, etc.						DO NOT WRITE IN THIS SPACE					
City & State			City & State			4. FEI Nu	4. FEI Number 65-0345103 Applied For Not Applicable				
Zip	Country Zip			Cou	ıntry	5. Certific	5. Certificate of Status Desired See Required				
	6. Name and Addre	ess of Current Rec	istered Agent		i	7. Name	and Address of New		<u> </u>	<u>, </u>	
		•	•	•							
					Name RONALD J. MUSCHONS Street Address (P.O. Box Number is Not Acceptable)						
	E, CHARLES'J										
3626 EVA	NS AVE. S FL 33901										
FI. WITER	3 1 2 33301				City	Ame		FL	Zip Code)	
8. The above	named entity submits t	nis statement for the	e purpose of changing its.	register			r both, in the state of F	lorida.	L		
		· · ·	purpose of changing its Ronald								
	FG 00	much	Executi	ve Dii	rector		10	SAN ST)		
SIGNATURE	Signature, typed or printed nam	of registered agent and	le if applicable (NOTE	: Registere	d Agent signati	re required when reinstating	<u>-</u>	DATE			
			/								
	FILE NOW:		9. Election Campaign	Financi	ng	\$5.00 May Be	Ma	ke Check Pa	vable to		
FEE IS \$61.25 Trust Fund Contrib				ັ □	Added to Fees			artment of State			
				-			I ALLEN TO SEE		07000 11	10	
10.	OFF I DT	CERS AND DIREC		11. TITU		ADDITIONS	/CHANGES TO OFFIC		CTORS IN	Addition	
TITLE NAME	JOHNSON, TODD		☐ Delete	NAM		DP KAREN EV	A NTC	L	Change	Z	
STREET ADDRESS	8931 CONFERENCE	DRIVE, SUITE 3	1		ET ADDRESS		COCK ROAD				
CITY-ST-ZIP	FT. MYERS FL 339			CITY	-ST-ZIP		FL 33912				
TITLE	DS		💹 Delete	TITLI	E	n	•	[Change	Addition	
NAME	WARMKA, TUESDA			NAM	E ET ADDRESS	GEORGE ANTOINE					
STREET ADDRESS		13141 INGLENOOK COURT				4169 SKATES CIRCLE					
CITY-ST-ZIP	FT: MYERS FL 339	19			-ST-ZIP		S, FL 33901		7.05	ST A HURL	
TITLE	D Weber, Jane		☐ Delete	TITLI NAM		D EDIC DEN	TRE	l	Change	Addition	
NAME STREET ADDRESS	360 COLGAN AVEN	HE SE	•		ET ADDRESS	ERIC BEN. PO BOX 60					
CITY-ST-ZIP	PORT CHARLOTTE		-م		-ST-ZIP	FT MYERS					
TITLE	DP		☐ Delete	TITLI	<u> </u>	D D	<u> </u>	[Change	Addition	
NAME	LAWSON, JOHN J			NAM		TOM PUZA				_`	
STREET ADDRESS	3984 ARNOLD AVE	NUE		STRE	ET ADDRESS	1456 BAR	CELONA				
CITY-ST-ZIP	NAPLES FL 33941			CiTY	-ST-ZIP		FL 33901				
TITLE	D		🔀 Delete	TITLI		DS	P.D.	[Change	Addition	
NAME	SABATKA, GLEN	2487		NAM		LYN TURN				ĺ	
STREET ADDRESS	19501 BEN HILL PH				ET ADDRESS -ST-ZIP	114 SOUT					
CITY-ST-ZIP	FT MYERS FL 3390	o				D TI MIEKS	, FL 33907		ZÎ Chanan	Addition	
TITLE	D WILKINS, CAROL		☐ Delete	TITLI		LAWSON,	тони л	Į	₫ Change	Addition	
NAME	I MILINING, UMRUL			NAM	-	Dirinoon,	001111 0				

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 of 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.

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

3814 SE 4TH AVENUE

CAPE CORAL FL 33904

5981 SEA GRASS LANE

NAPLES, FL 34116

Daytime Phone #