
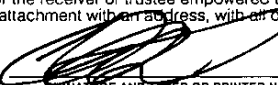


# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 05, 2007 8:00 am**  
**Secretary of State**

03-05-2007 90061 007 \*\*\*\*70.00

<b>DOCUMENT # N48083</b> 1. Entity Name <b>QUALITY LIFE CENTER OF SOUTHWEST FLORIDA, INC.</b>					
Principal Place of Business <b>3210 DR MARTIN LUTHER KING JR BLVD FT MYERS, FL 33916 US</b>			Mailing Address <b>P.O. DRAWER 1290 FORT MYERS, FL 33902</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>65-0321309</b>	
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>EBELINI, MARK A ESQ KNOTT, CONSOER, EBELINI, HART &amp; SWETT, P.A 1625 HENDRY STREET, SUITE 301 FORT MYERS, FL 33901</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <span style="float: right;">FL</span> Zip Code	
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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
Make check payable to Florida Department of State					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BARNES, CHARLES 14750 BEN C. PRATT-SIX MILE CYPRESS PKWY FORT MYERS, FL 33912	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRAINERD, JUBILEE 3095 BLOUNT ST. FT. MYERS, FL 33916	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRUNDIDGE, VANESSA J 889 111 AVE. NORTH NAPLES, FL 34108	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Brisbane, Safiyyah Spann 11215 Metro Parkway FT. MYERS, FL 33916	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BATH, DAVID 101 DEMERE LANE SANIBEL, FL 33908	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T CARR, Adrienne P.O. Box 2428 FT. MYERS, FL 33902	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C, D EBELINI, MARK A 1625 HENDRY STREET, SUITE 301 FORT MYERS, FL 33901	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Deshazo, Jaymie 1288 North Tamiami Trail North Ft. Myers, FL 33903	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SAUNDERS, CHARLES 1229 EL DORADO PARKWAY SE CAPE CORAL, FL 33904	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EVANS, DR. AMANDA 10501 FGL BLVD S. A83, Rm 137 FT. MYERS, FL 33965-6565	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SKINNER, CARL 3486 AVOCADO DRIVE FORT MYERS, FL 33901	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D J Singh, Peggy 5378 Ashton Circle Ft. Myers, FL 33907	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  <b>A. H. Mohammed</b> <i>ERC Dir.</i> Date: <b>3/1/07</b> (339) 334-2797					

*Attachment 40029670*  
**QUALITY LIFE CENTER OF SW FL., INC.**  
**DOCUMENT #N48083**

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

TITLE: D ADDITION: X  
NAME: LAWRENCE, CALLIE  
STREET ADDRESS: 17500 CHURCH AVE.  
CITY-ST-ZIP ALVA, FLORIDA 33920

TITLE: D ADDITION: X  
NAME: MILLAR, DR. KENNETH  
STREET ADDRESS: 10501 FGCU BLVD S. AB3, RM 137  
CITY-ST-ZIP FORT MYERS, FLORIDA 33965-6565

TITLE: D ADDITION: X  
NAME: MORGAN, FRED  
STREET ADDRESS: P O BOX 60210  
CITY-ST-ZIP FORT MYERS, FLORIDA 33906

TITLE: D ADDITION: X  
NAME: OSTENSEN, TOR  
STREET ADDRESS: 12751 WESTLINKS DR.,BLDG #3 #7  
CITY-ST-ZIP FORT MYERS, FL

TITLE: D ADDITION: X  
NAME: PERRY, LT. DUKE  
STREET ADDRESS: 2210 PECK ST.  
CITY-ST-ZIP FORT MYERS, FLORIDA 33901

TITLE: D ADDITION: X  
NAME: RUSSELL, STEPHEN  
STREET ADDRESS: P O BOX 399  
CITY-ST-ZIP FORT MYERS, FLORIDA 33902

TITLE: D ADDITION: X  
NAME: SCHAERF, MELISSA C.  
STREET ADDRESS: 4048 EVANS AVE., SUITE 304  
CITY-ST-ZIP FORT MYERS, FLORIDA 33901

TITLE: D ADDITION: X  
NAME: GONZALEZ, CHERYL SEALS  
STREET ADDRESS: 10501 FGCU BLVD. S.,AB3, RM 137  
CITY-ST-ZIP FORT MYERS, FLORIDA 33965-6565

*Attachment* 40029670  
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TITLE: D ADDITION: X  
NAME: SELDEN, JEAN AMUNDSEN  
STREET ADDRESS: 12481 MCGREGOR BLVD  
CITY-ST-ZIP FORT MYERS, FLORIDA 33919

TITLE: D ADDITION: X  
NAME: SIMMS, COUNCILMAN LEVON  
STREET ADDRESS: 2200 SECOND STREET  
CITY-ST-ZIP FORT MYERS, FLORIDA 33902

TITLE: D ADDITION: X  
NAME: SPADLEY, LYNN  
STREET ADDRESS: P O BOX 6669  
CITY-ST-ZIP FORT MYERS, FLORIDA 33911

TITLE: D ADDITION: X  
NAME: TURNEY, LORI  
STREET ADDRESS: 999 VANDERBILT BEACH RD 7<sup>TH</sup> FLOOR MDBC 9997C  
CITY-ST-ZIP NAPLES, FLORIDA 34108