

# 2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N99000002329

1. Entity Name

FAMILY EXTENDED CARE OF NAPLES, INC.

Principal Place of Business

1411 NORTHWEST 14TH AVENUE  
MIAMI FL 33125

Mailing Address

1411 NORTHWEST 14TH AVENUE  
MIAMI FL 33125-1616

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

65-0910707

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ANIELLO, JOSEPH ED.D  
1411 NORTHWEST 14TH AVENUE  
MIAMI FL 33125

7. Name and Address of New Registered Agent

Name

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

City

FL

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.

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☒ Delete  
CD  
SCHILLINGER, JACK  
1411 NORTHWEST 14TH AVENUE  
MIAMI FL 33125

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☒ Delete  
D  
SPIVAK, RUTH  
1411 NORTHWEST 14TH AVENUE  
MIAMI FL 33125

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete  
BMD  
SCHILLINGER, MARJORIE  
1411 NORTHWEST 14TH AVENUE  
MIAMI FL 33125

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☒ Change ☒ Addition  
CEO + D  
Joseph A. Aniello  
1411 N.W. 14th Avenue  
Miami, FL 33125

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☒ Addition  
STD  
Roy R. Lustig  
2600 Douglas Rd #911  
Coral Gables, FL 33134

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

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

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

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 REQUIRED**

FILED  
Apr 18, 2000 8:00 am  
Secretary of State

04-18-2000 90162 004 \*\*\*\*70.00



DO NOT WRITE IN THIS SPACE

CR2E037 (9/99)