

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000203

Entity Name: RESIDENTS' ALLIANCE FOR A QUALITY LIFESTYLE, INC.

Current Principal Place of Business:

10509 BELLA VISTA DRIVE
FORT MYERS, FL 33913

Current Mailing Address:

10509 BELLA VISTA DRIVE
FORT MYERS, FL 33913 US

FEI Number: 56-2426358

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF, P.A.
12140 CARISSA COMMERCE COURT
#200
FORT MYERS, FL 33966 US

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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DP
Name BROKKE, CAROLE
Address 10509 BELLA VISTA DRIVE
City-State-Zip: FORT MYERS FL 33913

Title DIRECTOR
Name BICKELMAN, RICHARD
Address 10518 BELLA VISTA DR.
City-State-Zip: FORT MYERS FL 33913

Title DIRECTOR
Name WERNER, SHARON
Address 10523 CARENA CIRCLE
City-State-Zip: FORT MYERS FL 33913

Title DIRECTOR
Name COOPER, GARY
Address 10541 CASELLA WAY #201
City-State-Zip: FORT MYERS FL 33913

Title DIRECTOR
Name FIAMINGO, PATRICIA
Address 9933 BELLA VISTA CT
City-State-Zip: FORT MYERS FL 33913

Title DIRECTOR
Name CHIAL, TOM
Address 11623 GIULIA DRIVE
City-State-Zip: FORT MYERS FL 33913

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: CAROLE BROKKE

PRESIDENT

02/06/2024

Electronic Signature of Signing Officer/Director Detail

Date