

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11000005758

Entity Name: DISABILITY WELLNESS FOUNDATION INC

Current Principal Place of Business:

3900 WIMBLEDON DR
LAKE MARY, FL 32746

Current Mailing Address:

3900 WIMBLEDON DR
LAKE MARY, FL 32746 US

FEI Number: 45-2567992

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KISWANI, DANNY
3900 WIMBLEDON DRIVE
LAKE MARY, FL 32746 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: DANNY KISWANI

02/04/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name KISWANI, NADIA
Address 3900 WIMBLEDON DRIVE
City-State-Zip: LAKE MARY FL 32746

Title TD
Name KISWANI, DAVID
Address 3900 WIMBLEDON DRIVE
City-State-Zip: LAKE MARY FL 32746

Title DIR
Name HAFZA, SALEEM
Address 3900 WIMBLEDON DRIVE
City-State-Zip: LAKE MARY FL 32746

Title DIR
Name MELIA, BOB
Address 3900 WIMBLEDON DR
City-State-Zip: LAKE MARY FL 32746

Title DIR
Name KISWANI, DANNY
Address 3900 WIMBLEDON DR
City-State-Zip: LAKE MARY FL 32746

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: NADIA KISWANI

PD

02/04/2016

Electronic Signature of Signing Officer/Director Detail

Date