2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2014
Secretary of State
CC1073853515

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Entity Name: DISABILITY WELLNESS FOUNDATION INC

Current Principal Place of Business:

1501 WEST FIRST STREET
SANFORD, FL 32771

Current Mailing Address:

1501 WEST FIRST STREET
SANFORD, FL 32771

FEI Number: 45-2567992

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

KISWANI, NADIA
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:

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

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

Title	DIR
Name	NERETTE, JEAN CLAUDE MD
Address	3900 WIMBLEDON DRIVE
City-State-Zip:	LAKE MARY FL 32746

Title	DIR
Name	MELIA, BOB
Address	1501 WEST FIRST STREET
City-State-Zip:	SANFORD FL 32771

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 04/23/2014

Electronic Signature of Signing Officer/Director Detail — Date