

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19000013089

Entity Name: DR. GABONE QHSC, INC.

Current Principal Place of Business:

2004 FOXTAIL VIEW COURT
WEST PALM BEACH, FL 33411

Current Mailing Address:

2004 FOXTAIL VIEW COURT
WEST PALM BEACH, FL 33411 US

FEI Number: 84-3543971

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GABONE-MWALUPINDI, HARRIETH
2004 FOXTAIL VIEW COURT
WEST PALM BEACH, FL 33411 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 P
Name GABONE-MWALUPINDI, HARRIETH
Address 6426 EMERALD DUNES DRIVE, APT
308
City-State-Zip: WEST PALM BEACH FL 33411

Title VP
Name GABONE, GILBERT E
Address 29 COURTLAND STREET
City-State-Zip: NORWICH NY 13815

Title TR
Name MWAKALINGA, KISSAH I
Address 2 FLOWER HILL ROAD
City-State-Zip: POUGHKEEPSIE NY 12603

Title SEC
Name SCHNEIDER, ANNIE E
Address 4101 SPRING GROVE AVENUE UNIT
212
City-State-Zip: CINCINNATI OH 45223

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: HARRIETH GABONE-MWALUPINDI

PRESIDENT

05/03/2021

Electronic Signature of Signing Officer/Director Detail

Date