

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**

DOCUMENT# N19000013089

**Jan 13, 2024**

**Entity Name:** DR. GABONE QHSC, INC.

**Secretary of State  
6552122436CC**

**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: Yes**

**Name and Address of Current Registered Agent:**

GABONE, HARRIETH KOKUSHUBILA DR.  
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: HARRIETH KOKUSHUBILA GABONE**

**01/13/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, CEO & FOUNDER  
Name            GABONE, HARRIETH KOKUSHUBILA DR.  
Address        2004 FOXTAIL VIEW CT  
City-State-Zip: WEST PALM BEACH FL 33411

Title            VP  
Name            SIACA BEY, PER ANKH K.G  
Address        154 QUEEN VICTORIA ST  
City-State-Zip: CULPEPER VA 22701

Title            TR  
Name            DUDECK, KATHRYN ELIZABETH  
Address        12031 CYPRESS KEY WAY  
City-State-Zip: ROYAL PALM BEACH FL 33411

Title            SEC  
Name            DANTES, VALENTINE  
Address        5763 LINCOLN CIRCLE EAST  
City-State-Zip: LAKE WORTH FL 33463

Title            DIRECTOR, BOARD  
Name            MSAMBICHAKA, LILIAN DR.  
Address        11 KATLYN DR.  
City-State-Zip: TOWNSEND DE 19734

Title            DIRECTOR, BOARD  
Name            RANDALL, GWEN DR.  
Address        1050 UNION UNIVERSITY DR.  
City-State-Zip: JACKSON TN 38305-3656

Title            DIRECTOR, BOARD  
Name            JONES, VICTORIA  
Address        1100 MARISA LN  
City-State-Zip: DESOTO TX 75115

Title            DIRECTOR, BOARD  
Name            MUSA, JANET  
Address        11718 LAUREL VALLEY CIRCLE  
City-State-Zip: WELLINGTON FL 33414

**Continues on page 2**

*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 K. GABONE**

**PRESIDENT, CEO AND  
FOUNDER**

**01/13/2024**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title DIRECTOR, BOARD  
Name FREEMAN, BRITTANY LEIGH  
Address 4314 N MARY CIRCLE  
City-State-Zip: PALM BEACH GARDENS FL 33410

Title QHSC ADVISOR  
Name BEHUNIAK, KRISTIN MARIE  
Address 84 CHESTNUT HILL LANE  
City-State-Zip: WILLIAMSVILLE NY 14221

Title QHSC ADVISOR  
Name GABONE, IRENE S  
Address 20 LOCUST ST  
City-State-Zip: NORWICH NY 13815

Title QHSC ADVISOR  
Name GABONE, GILBERT  
Address 20 LOCUST ST  
City-State-Zip: NORWICH NY 13815

Title QHSC ADVISOR  
Name GABONE, GEORGE L  
Address 5636 EAGLE CREEK CT  
City-State-Zip: MAINVILLE OH 45039