

**2002 UNIFORM BUSINESS REPORT (UBR)****DOCUMENT # 705551**

1. Entity Name

**FLORIDA ALLIANCE FOR RETIRED AMERICANS, INC.****FILED****Jan 31, 2002 8:00 am**  
**Secretary of State**

01-31-2002 90085 035 \*\*\*\*61.25

Principal Place of Business

12773 W FOREST HILL BLVD  
SUITE 211  
WELLINGTON FL 33414  
US

Mailing Address

12773 W FOREST HILL BLVD  
SUITE 211  
WELLINGTON FL 33414  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City &amp; State

City &amp; State

Zip

Country

Zip

Country

4. FEI Number

**59-2057965**

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional  
Fee Required

DO NOT WRITE IN THIS SPACE



6. Name and Address of Current Registered Agent

FRANSETTA, TONY  
12773 W FOREST HILL BLVD  
SUITE 211  
WELLINGTON FL 33414

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**9. Election Campaign Financing  
Trust Fund Contribution. ☐**\$5.00** May Be  
Added to Fees**Make Check Payable to  
Department of State**

10. OFFICERS AND DIRECTORS

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DP  
FRANSETTA, TONY  
12059 SUNSET PT CT  
WELLINGTON FL 33414 ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DV  
POLAKOV, SHERM  
300 BERKELY RD #303  
HOLLYWOOD FL 33024 ☒ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DT  
DAVIDSON, MARNA  
5550 GLADES RD  
BOCA RATON FL 33431 ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
SD  
ROBBINS, HELEN  
6814 S.W. 114TH PL #H  
MIAMI FL 33173 ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
LABELL, HAROLD  
206 MARY DRIVE  
OLDSMAR FL 34677 ☐ DeleteTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
DV  
Weldon, Jim  
201 S.E. 24th Street  
Ft. Lauderdale, FL 33316 ☒ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ AdditionTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Tony Frassetto*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

1-14-02

Daytime Phone #

(561) 792-8799

CR2E037 (9/01)