

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 02, 2007 8:00 am
Secretary of State

04-02-2007 90100 048 ****61.25



DOCUMENT # 708889

1. Entity Name

BACHELORS AND BELLES, INC.

Principal Place of Business

P.O. BOX 260443
TAMPA FL 33685-0401
US

Mailing Address

P.O. BOX 260443
TAMPA FL 33685-0401
US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

23-7199158

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SINNES, ERNEST
7210 PAT BLVD
TAMPA FL 33615**

7. Name and Address of New Registered Agent

Name

LAURA DIEZ

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

3404 W CARRAS ST

City

Tampa

FL

Zip Code

33614-6604

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Laura Diez

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE P ☐ Delete
NAME SINNES, ERNEST
STREET ADDRESS 7210 PAT BLVD
CITY ST ZIP TAMPA FL 33615-2110

TITLE VPD ☐ Delete
NAME DIEZ, LAURA
STREET ADDRESS 3404 W. CARRAS ST
CITY ST ZIP TAMPA FL 33614-6604

TITLE SVPD ☐ Delete
NAME NASWORTHY, DIANE
STREET ADDRESS 1804 W. NORTH ST
CITY ST ZIP TAMPA FL 33604-5832

TITLE T ☐ Delete
NAME SCIONTI, BETTIE
STREET ADDRESS 3713 CHAMPAGNE DR #115
CITY ST ZIP TAMPA FL 33618

TITLE S ☐ Delete
NAME MCCARTHY, JAN
STREET ADDRESS 1012 SYLVIA LN
CITY ST ZIP TAMPA FL 33613-2007

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY ST ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☒ Change ☐ Addition
NAME LAURA DIEZ
STREET ADDRESS 3404 W CARRAS ST
CITY ST ZIP TAMPA, FL 33614-6604

TITLE VPD ☒ Change ☐ Addition
NAME NASWORTHY, DIANE
STREET ADDRESS 1804 W NORTH ST
CITY ST ZIP TAMPA, FL 33604-5832

TITLE SUPD ☒ Change ☐ Addition
NAME PRESLEY, PATRICIA
STREET ADDRESS 7816 N TAMICA ST
CITY ST ZIP TAMPA, FL 33614-3348

TITLE ☒ Change ☐ Addition
NAME DiGangi, FAYE
STREET ADDRESS 4007 ORIO AVE
CITY ST ZIP TAMPA, F 33616-1231

TITLE ☒ Change ☐ Addition
NAME BRAUNER, JOAN
STREET ADDRESS 8430 E 27th AVE
CITY ST ZIP TAMPA, FL 33619-1301

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY ST ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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

Faye DiGangi **FAYE DiGangi, TREASURER 2-24-07 813 839 4150**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #