2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N01000002210

1. Entity Name



FILED Mar 23, 2007 8:00 am Secretary of State

03-23-2007 90017 045 ****61.25

SINGLES NETWORK OF NAPLES, INC.									
826 WIGGINS PASS ROAD #312 P 0		Mailing Address P OBOX 770263 NAPLES, FL 34107				Han aanu aank aan	46 60 1	1816 H881 H811 A	BITTER GI ITTER
2. Principal Place of Business - No P.O. Box # 3. Ma		3. Mailing Address	. Mailing Address						
Suite, Apl. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		02062007 _C	hg-NP	CR2E0	37 (1 2/06)	
City & Stat	e	City & State		4	59-372144	17			pplied For ot Applicable
Zip	Country	Zip	Country	5	5. Certificate of S	tatus Desired		\$8.75 Ad Fee Require	ditional ed
	6. Name and Address of Current	Registered Agent			. Name and Add	Iress of New R	egistered	Agent	
ROGERS.	WILLIAM L		Name						
	IAMI TRAIL N STE 501		Street Ad	dress (P.O). Box Number is	Not Acceptable)		
			City	 			FL	Zip Cod	de
	named entity submits this statement for ions of registered agent.	or the purpose of changing its	registered office or	registered	agent, or both, in	the State of Flo	rida. 1 am	familiar with	, and accept
SIGNATURE .	Signature, typed or printed name of regulatered agent	and title if applicable. (NOTE	Registered Agent signatur	re required whe	en reinstating)		DATE		
SIGNATURE	Signature, typed or printed name of registered agent Filling Fee is \$81.25 Due by May 1, 2007	· · · · · · · · · · · · · · · · · · ·	paign Financing	\$!	5.00 May Be	1	ake chec	k payable triment of S	
SIGNATURE .	Filing Fee is \$61.25	9. Election Carr Trust Fund C	paign Financing	□ \$4 □ Ad	5.00 May Be	Flori	ake chec ida Depai	rtment of S	State
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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: Bever	" Miller	Beserly	Miller	Mar 2907	239-944-9541
SIGNATURE AND TYP	ED OR PRINTED NAME OF SIGNIN	G OFFICER OR DIRECTOR		Date	Daytime Phone #

ATTACHMENT 40040330

#N01000003210

Singles Network of Nsples, Inc. P. O. Box 770263 Naples, FL 34107

Following is a list of officers for 2007.

CHAIRWOMAN Annette List 197 Monterey Drive Naples, FL 34119

TREASURER Beverly Miller 3491 Pointe Creek Ct. 104 Bonita Springs, FL 34134

SECRETARY Welma Borges 8396 Bahamas Rd. Ft. Myers, FL 33912

DIRECTOR Darrell March 4615 Bayshore Dr. E6 Naples, FL 34112

DIRECTOR Bill McLaughlin P. O. Box 105 Naples, FL 34106

DIRECTOR Dan Ruberg 3000 Golf Shore Blvd. N Naples, FL 34103