2002 UNIFORM BUSINESS REPORT (UBR)

5/6/2002-90117-040-$61.25-$61.25

DOCUMENT # N13145

FILED

02 MAY 28 AM 9:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name

THE COMMODORE SINGLES CLUB OF STUART, FLORIDA, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
3195 NE SAVANA RD JENSEN BCH FL 34984 US	414 PONDEROSA DR. FT PIERCE FL 34982 US

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	P.O. Box 873 Suite, Apt. #, etc.
City & State	STUART, FL City & State
Zip / Country	34995 Zip / Country

4. FEI Number 59-2454052 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GREENWALD, EVELYN 414 PONDEROSA DR. FT PIERCE FL 34982	Name: MARIE S. VOLPONI Street Address (P.O. Box Number is Not Acceptable): 2219 SE GLOVER ST. City: PORT ST LUCIE, FL FL Zip Code 34984

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: X Marie Stella Volponi 4-14-02
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP ELLSWORTH, SOFIA 2600 SE OCEAN BLVD. STUART FL 34996	☐ Delete	D ELLSWORTH, SOFIA 2600 S.E. OCEAN BLVD STUART, FL. 34996	☑ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P GREENWALD, EVELYN 414 PONEROSA DR. FORT PIERCE FL 34982	☑ Delete	P MARIE STELLA VOLPONI 2219 SE GLOVER ST PORT ST. LUCIE, FL. 34984	☐ Change	☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WHITING, ROSE MARIE 1123 ALAMANDA LANE STUART FL 34994	☐ Delete	T MARGARET BAGULEY 3196 SW SUNSET TRACE CIRCLE PALM CITY FL. 34990	☐ Change	☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HILLER, JO A 6531 SE FEDERAL HWY STUART FL 34997	☐ Delete	1ST VP HILLER, JO A 6531 SE FEDERAL HWY STUART FL 34997	☑ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DEMARIA, JOE 8527 MARLBERRY CT PORT SAINT LUCIE FL 34952	☐ Delete	2ND VP DEMARIA, JOSEPH 8527 MARLBERRY CT. PORT ST. LUCIE FL. 34952	☑ Change	☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S TROCCOLI, DOROTHY 4275 SE BRITTNEY CIRCLE PORT ST. LUCIE FL 34952	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change	☐ Addition

CR2E037 (9/01)

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: X Marie Stella Volponi 4-14-02
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #