2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Jun 08, 2000 8:00 am
Secretary of State
06-08-2000 90023 030 ****61.25

DOCUMENT # N43747

1. Entity Name

SAILING SINGLES CLUB, INC.

Principal Place of Business	Mailing Address
12352 MCGREGOR WOODS FT. MYERS FL 33908 US	5208 TOWER DR. CAPE CORAL FL 33904-5851 US

2. Principal Place of Business	3. Mailing Address
63 PERCY ST. #63	63 PERCY ST. #63
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: FORT MYERS, FL	City & State: FORT MYERS, FL
Zip: 33910 / Country: LEE	Zip: 33910 / Country: LEE

851392

DO NOT WRITE IN THIS SPACE

4. FEI Number: 65-0274378 — 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
ERICKSON, JOCELYN 5208 TOWER DR. CAPE CORAL FL 33904	Name: GLENN TOMLINSON Street Address (P.O. Box Number is Not Acceptable): 63 PERCY STREET #63 City: FORT MYERS FL Zip Code: 33910

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: Gray Mines (GRAY MINES/TREA 4/28/00
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	D ☒ Delete	TITLE	PRESIDENT/COMMODORE ☒ Change ☐ Addition
NAME	ERICKSON, JOCELYN	NAME	GLENN TOMLINSON
STREET ADDRESS	P.O. BOX 61504	STREET ADDRESS	63 PERCY ST. #63
CITY-ST-ZIP	FT MYERS FL 33906	CITY-ST-ZIP	FORT MYERS, FL 33910
TITLE	VC ☒ Delete	TITLE	VICE PRESIDENT/VICE COMMODOR ☒ Change ☐ Addition
NAME	TOMLINSON, GLENN	NAME	ANN FRANCES
STREET ADDRESS	63 PERRY ST.-#63	STREET ADDRESS	1500 POPHAM DRIVE-C-12
CITY-ST-ZIP	FT MYERS FL 33910	CITY-ST-ZIP	FORT MYERS, FL 33919
TITLE	T ☒ Delete	TITLE	TREASURER ☒ Change ☐ Addition
NAME	SHARKEY, BARBARA A	NAME	GRAY MINES
STREET ADDRESS	6016 COCOS DR.	STREET ADDRESS	2414 GORHAM AVE
CITY-ST-ZIP	FT. MYERS FL 33908	CITY-ST-ZIP	FORT MYERS, FL 33907
TITLE	S ☐ Delete	TITLE	☐ Change ☐ Addition
NAME	MCLAUGHLIN, BONNIE	NAME	
STREET ADDRESS	261 FAIRWEATHER LANE	STREET ADDRESS	
CITY-ST-ZIP	FT. MYERS BEACH FL 33931	CITY-ST-ZIP	
TITLE	D ☒ Delete	TITLE	CRUISE DIRECTOR ☒ Change ☐ Addition
NAME	DORMAN, DOUGLAS	NAME	WILMA AMES
STREET ADDRESS	2323 CLUB HOUSE ROAD	STREET ADDRESS	352 NICKLAUS BLVD
CITY-ST-ZIP	N FT MYERS FL 33903	CITY-ST-ZIP	NORTH FORT MYERS, FL 33903
TITLE	D ☒ Delete	TITLE	MEMBERSHIP DIRECTOR ☒ Change ☐ Addition
NAME	LIEBERMAN, JIM	NAME	MARY SCOFIE
STREET ADDRESS	P.O. BOX 151713 N/A	STREET ADDRESS	2125 GOLFSIDE VILLAGE DRIVE
CITY-ST-ZIP	CAPE CORAL FL 33915	CITY-ST-ZIP	LEHIGH ACRES, FL 33972

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: Gray Mines (GRAY MINES/TREASURER) 4/28/00
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (9/99)