


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Sep 03, 2008 8:00 am
Secretary of State

09-03-2008 90005 016 ****61.25

DOCUMENT # N94000002144

1. Entity Name
SUPER SINGLES OF FLORIDA, INC.



Principal Place of Business Mailing Address
190 S NOVA RD **1524 S RIVERSIDE DR**
ORMOND BEACH FL 32174 **EDGEWATER FL 32132**



2. Principal Place of Business - No P.O. Box #
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
Gladys LARGENT
 Suite, Apt. #, etc.
4193 Woodland CIR
 City & State
Deland FL
 Zip Country
32724 **Volusia**

4. FEI Number Applied For
59-3250348 Not Applicable

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

6. Name and Address of Current Registered Agent
STILL, ELIZABETH R
1524 S RIVERSIDE DR
EDGEWATER FL 32132

7. Name and Address of New Registered Agent
 Name **LARGENT Gladys**
 Street Address (P.O. Box Number is Not Acceptable)
4193 Woodland Circle
Deland
 City **Deland** FL Zip Code **32724**

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 **LARGENT Gladys** *Gladys Largent* **7-28-08**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent Signature required when transferring) DATE

FILE NOW: FEE IS \$61.25
Due By September 3, 2008

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 NAME STREET ADDRESS CITY-ST-ZIP	CPR FREESE, THUVIA 6207 KLONDIKE DR PORT ORANGE FL 32127 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CPR WOLFE, EVELYN 434 NASH LANE PORT ORANGE FL 32127 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V SOMMERS, WAYNE 136 FAIRVIEW AVE DAYTONA FL 32114 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S MUSGROVE, HELEN 2032 JASON ST ORMOND FL 32174 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T STILL, ELIZABETH 1524 S RIVERSIDE DR EDGEWATER FL 32132 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT Gladys LARGENT 4193 Woodland CIR. Deland FL 32724 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1st Vice Pres. CIARA Condello 315 UNIVERSITY Blvd. DAYTONA Beach FL 32118 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2nd Vice Pres. HORACE POPE P.O. Box 1885 DeLEON SPRINGS FL 32130 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S DARlene Lindsey 4193 Woodland CIR Deland FL 32724 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T George Torres 1717 MONTGOMERY AVE. Holly Hill FL 32117 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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 *Gladys Largent* **Gladys LARGENT** **7-28-08** **386-736-0749**