NONPROFIT
CORPORATION
ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 26, 1999 8:00 am
Secretary of State
02-26-1999 90059 040 ****70.00

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Corporation Name
SENIORNET, INC.

604757 - 90004 - 2

02/26/99 90059 040 70.00

Principal Place of Business	Mailing Address
85 FIRST STREET T. MYERS FL 33901	2285 FIRST STREET FT. MYERS FL 33901

Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
	26	09/30/1996
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number 59-1854441 ☐ Applied For ☐ Not Applicable
	27	
City & State	City & State	5. Certificate of Status Desired ☒ $8.75 Additional Fee Required
	28	
Zip Country 25	Zip Country 29 30	6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
WHITE, TERRY 2285 FIRST STREET FT. MYERS FL 33901	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code

Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
D ☒ DELETE STULTS, MARY 768 TROPICAL CIRCLE SARASOTA FL 34243	1.1 TITLE D ☐ Change ☒ Addition 1.2 NAME Cathy Emmett 1.3 STREET ADDRESS 7674 37th St. Circle East 1.4 CITY-ST-ZIP Sarasota, FL 34243
D ☒ DELETE MOTT, JAMES L. 6777 WINKLER RD. FT. MYERS FL	2.1 TITLE D ☐ Change ☒ Addition 2.2 NAME Terry White 2.3 STREET ADDRESS 2285 First Street 2.4 CITY-ST-ZIP Fort Myers, FL 33901
D ☐ DELETE FERRELL, MARY ALICE 1038 S. OSPREY AVE. SARASOTA FL	3.1 TITLE ☐ Change ☐ Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
D ☐ DELETE FALLERT, HELEN 5099 FAIRFIELD DRIVE FT. MYERS FL	4.1 TITLE ☐ Change ☐ Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
☐ DELETE	5.1 TITLE D ☐ Change ☒ Addition 5.2 NAME Laurie Schnaufer 5.3 STREET ADDRESS 1300 Shoreview Drive 5.4 CITY-ST-ZIP ~~Englewood, FL 34223~~
☐ DELETE	6.1 TITLE ☐ Change ☐ Addition 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 4/30/99 (941) 332-4233
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

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