

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N98000002560

1. Entity Name

50+ FUN IN THE SUN SINGLES, INC.

Principal Place of Business

916 HANCOCK BRIDGE PKWY
CAPE CORAL FL 33990
US

Mailing Address

916 HANCOCK BRIDGE PKWY
CAPE CORAL FL 33990
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0828044

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

ROACH, JOAN
916 HANCOCK BRIDGE PKWY
CAPE CORAL FL 33990

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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 Joan Roach, President & Director

04/04/2001

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
NAME ROACH, JOAN ☐ Delete
STREET ADDRESS 916 HANCOCK BRIDGE PKWY
CITY-ST-ZIP CAPE CORAL FL 33903

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☒ Delete
NAME BUSH, JANET
STREET ADDRESS 1569 MANCHESTER BLVD
CITY-ST-ZIP FORT MYERS FL 33919

TITLE D ☒ Change ☐ Addition
NAME Culler, Carl
STREET ADDRESS 15129 Stella Del Mar Lane
CITY-ST-ZIP Fort Myers, FL 33908

TITLE S ☒ Delete
NAME CROWTHER, ARTHUR
STREET ADDRESS 4100 STEAMBOAT BEND #202
CITY-ST-ZIP FORT MYERS FL 33919

TITLE D ☒ Change ☐ Addition
NAME Masselli, Gretchen
STREET ADDRESS 3727 Maxine Street
CITY-ST-ZIP Fort Myers, FL 33901

TITLE D ☒ Delete
NAME BEDNARSKI, THERESA
STREET ADDRESS 3428 SE 4TH PLACE
CITY-ST-ZIP CAPE CORAL FL 33904

TITLE D ☒ Change ☐ Addition
NAME Ashmore, Ruth
STREET ADDRESS 4041 SE 11th Place
CITY-ST-ZIP Cape Coral, FL 33904

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 title empowered.

SIGNATURE Carl Culler REQUIRED. Culler

04/04/2001

(941) 481-5224

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)

0086018



DO NOT WRITE IN THIS SPACE