

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 15, 2004 8:00 am
Secretary of State

03-15-2004 90047 043 ****61.25

DOCUMENT # N98000002560

1. Entity Name

50+ FUN IN THE SUN SINGLES, INC.



Principal Place of Business

4041 SE 11 PLACE
SUITE 102
CAPE CORAL FL 33904
US

Mailing Address

4041 SE 11 PLACE
SUITE 102
CAPE CORAL FL 33904
US

2. Principal Place of Business

15050 Bridgway Lane

Suite, Apt. #, etc.

#704

3. Mailing Address

15050 Bridgway Lane

Suite, Apt. #, etc.

#704

City & State

Fort Myers, FL 33919

City & State

Fort Myers, FL 33919

Zip

33919

Country

Lee

Zip

33919

Country

Lee

4. FEI Number

65-0828044

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

MOORE

CR2E037 (11/03)



6. Name and Address of Current Registered Agent

ASHMORE, RUTH
4041 SE 11 PLACE
SUITE 102
CAPE CORAL FL 33904

7. Name and Address of New Registered Agent

Name

Sally Stratton

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

15050 Bridgway Lane #704

City

Fort Myers

FL

Zip Code
33919

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 Sally Stratton

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

3/10/04

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

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 PD ☒ Delete
NAME ASHMORE, RUTH E
STREET ADDRESS 4041 SE 11 PLACE - SUITE #102
CITY-ST-ZIP CAPE CORAL FL 33904

TITLE TD ☒ Delete
NAME WILLIAMS, ARVIN
STREET ADDRESS 5151 ATLANTA AVENUE
CITY-ST-ZIP FORT MYERS FL 33905

TITLE SD ☒ Delete
NAME GYURE, JOYCE
STREET ADDRESS 14531 GROUDE CAY CIRCLE #3002
CITY-ST-ZIP FORT MYERS FL 33908

TITLE VD ☐ Delete
NAME WALSER, MIKE
STREET ADDRESS 14192 HAITIAN DR
CITY-ST-ZIP FORT MYERS FL 33912

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Change ☒ Addition
NAME SALLY STRATTON
STREET ADDRESS 15050 BRIDGWAY #704
CITY-ST-ZIP FORT MYERS, FL. 33919

TITLE TD ☐ Change ☒ Addition
NAME WALTER DIBBLE
STREET ADDRESS 1050 LAKE MCOREGOR DR. # 674H
CITY-ST-ZIP FORT MYERS, FL. 33919

TITLE SD ☐ Change ☒ Addition
NAME JOHANNA SEYBOLD
STREET ADDRESS 17455-A BLUEBERRY HILL DR.
CITY-ST-ZIP FORT MYERS, FL 33908

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

TITLE ☐ Change ☐ Addition
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 like empowered.

SIGNATURE: Walter Dibble

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Walter Dibble

3-10-04

Date

239-
432-0304

Daytime Phone #