

FILED
Mar 31, 2003 8:00 am
Secretary of State

03-31-2003 90151 015 ***150.00

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # *P02000062186*

1. Entity Name

Alice's Bridge Club, Inc



DO NOT WRITE IN THIS SPACE

90065736

2. Principal Place of Business

2813 N. Course Dr #108A

3. Mailing Address

Same

Suite, Apt. #, etc.

108A

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Pompano Beach, FL

City & State

4. FEI Number

02-0616855

Applied For

Not Applicable

Zip

33069

Country

USA

Zip

Country

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name

Alice Sunshine

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

2813 N Course Dr #108A

City

Pompano Beach

FL

Zip Code

33069

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

Alice K Sunshine

3-25-03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	<i>PS</i>
NAME	<i>Alice Sunshine</i>
STREET ADDRESS	<i>2813 N. Course Dr #108A</i>
CITY-ST-ZIP	<i>Pompano Beach, FL 33069</i>
TITLE	
NAME	
STREET ADDRESS	
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**DO NOT WRITE
IN THIS SPACE**

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 607, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address, with all other like empowered.

SIGNATURE:

Alice K Sunshine

3-25-03

561-843-4344

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Display Phone #

CR2E034B (12/02)