2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 18, 2020
Secretary of State
3745665233CC

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Entity Name: FIFTY PLUS SOFTBALL LEAGUE IN CAPE CORAL, INC.

Current Principal Place of Business:

1136 NE PINE ISLAND RD
ATTN J MADIA SUITE 10
CAPE CORAL, FL 33909

Current Mailing Address:

PO BOX 21
SAINT JAMES CITY, FL 33956 US

FEI Number: 51-0605122

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MADIA, JOSEPH V
1136 NE PINE ISLAND RD
ATTN J MADIA SUITE 10
CAPE CORAL, FL 33909 US

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: JOSEPH MADIA 05/18/2020

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PRES	Title	VP
Name	MOSCUZZA, ANGELO	Name	COHEN, STANLEY
Address	1136 NE PINE ISLAND RD ATTN J MADIA SUITE 10	Address	1136 NE PINE ISLAND RD ATTN J MADIA SUITE 10
City-State-Zip:	CAPE CORAL FL 33909	City-State-Zip:	CAPE CORAL FL 33909
Title	SEC	Title	TRES
Name	FORD, JENNIFER	Name	MADIA, JOSEPH V
Address	1136 NE PINE ISLAND RD ATTN J MADIA SUITE 10	Address	1136 NE PINE ISLAND RD ATTN J MADIA SUITE 10
City-State-Zip:	CAPE CORAL FL 33909	City-State-Zip:	CAPE CORAL FL 33909
Title	DIR		
Name	VOLPE, ANTHONY		
Address	PO BOX 21		
City-State-Zip:	SAINT JAMES CITY FL 33956		

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: JOSEPH MADIA TREA 05/18/2020

Electronic Signature of Signing Officer/Director Detail — Date