## **2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000009145

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

FILED
Mar 18, 2013
Secretary of State
CC1039771434

## **Current Principal Place of Business:**

1421 NW 17TH ST. CAPE CORAL, FL 33993

## **Current Mailing Address:**

PO BOX 21

SAINT JAMES CITY. FL 33956 US

FEI Number: 51-0605122 Certificate of Status Desired: Yes

## Name and Address of Current Registered Agent:

MARSHALL, ALAN LJR. 1421 NW 17TH ST. CAPE CORAL, FL 33993 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:

Electronic Signature of Registered Agent Date

Officer/Director Detail:

Title PRES Title VP

Name MADIA, JOSEPH Name COBB, JOSEPH

Address 3307 SW 8TH STREET Address 1206 SW 2ND AVENUE

City-State-Zip: CAPE CORAL FL 33991 City-State-Zip: CAPE CORAL FL 33991

Title SEC Title TRES

Name FORD, JENNIFER Name MARSHALL, ALAN LJR.

Address 3759 PAPAYA STREET Address 1421 NW 17TH ST.

City-State-Zip: SAINT JAMES CITY FL 33956 City-State-Zip: CAPE CORAL FL 33993

Title DIR

Name HOLZMAN, GEORGE
Address 1515 SW 53RD TERRACE
City-State-Zip: CAPE CORAL FL 33914

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: ALAN L MARSHALL JR

Electronic Signature of Signing Officer/Director Detail

**TREASURER** 

03/18/2013

Date