2025 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N95000005985

Entity Name: FIFTY OVER FIFTY, INC.

Current Principal Place of Business:

3350 SW 27 AVE., SUITE 1602 COCONUT GROVE, FL 33133

Current Mailing Address:

PO BOX 331864

MIAMI, FL 33233-1864 US

FEI Number: 65-0630460 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SHEER & COMPANY 3350 SW 27 AVE., SUITE 1602 COCONUT GROVE, FL 33133 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: EMERY B SHEER CPA

05/23/2025

FILED

May 23, 2025

Secretary of State 7441823414CC

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title	TREASURER	Title	VP DEVELOPMENT
Name	CARPEL, SYDNEY	Name	MASON, TERRI
Address	PO BOX 331864	Address	PO BOX 331864

City-State-Zip: MIAMI FL 33233-1864 City-State-Zip: MIAMI FL 33233-1864

Title SECRETARY Title PRESIDENT

NameMINTZ, PAULETTENameKAMIN, JACQUELYNAddressPO BOX 331864AddressPO BOX 331864

City-State-Zip: MIAMI FL 33233-1864 City-State-Zip: MIAMI FL 33233-1864

Title CO-VP MEMBERSHIP Title CO-VP MEMBERSHIP

NameWEINER, AUDREYNameADLER, SARAAddressPO BOX 331864AddressPO BOX 331864

City-State-Zip: MIAMI FL 33233-1864 City-State-Zip: MIAMI FL 33233-1864

Title DIRECTOR Title CO- VP GRANTS

Name GERSON, DENISE Name KAPLAN, TERRY L

Address PO BOX 331864

PO BOX 331864

City-State-Zip: MIAMI FL 33233-1864 City-State-Zip: MIAMI FL 33233-1864

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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: JACQUELYN KAMIN

Electronic Signature of Signing Officer/Director Detail

PRESIDENT

05/23/2025

Date

Officer/Director Detail Continued:

Title CO-VP GRANTS

Name RICHARDSON , LETITIA

Address PO BOX 331864

City-State-Zip: MIAMI FL 33233-1864

Title VP DEVELOPMENT

Name GULLONG, JANE

Address PO BOX 331864

City-State-Zip: MIAMI FL 33233-1864

Title DIRECTOR

Name GASSENHEIMER, LINDA

Address PO BOX 331864

City-State-Zip: MIAMI FL 33233-1864

Title DIRECTOR

Name OHAYON, HELAINE Address PO BOX 331864

City-State-Zip: MIAMI FL 33233-1864

Title VP PROGRAMMING
Name PORTE, MEREDITH
Address PO BOX 331864

City-State-Zip: MIAMI FL 33233-1864

Title DIRECTOR

Name RICHARDSON, DAVID

Address PO BOX 331864

City-State-Zip: MIAMI FL 33233-1864

Title TREASURER

Name MONTERO, BARBARA

Address PO BOX 331864

City-State-Zip: MIAMI FL 33233-1864

Title CO-VP PROGRAMS
Name MASON, ALAN
Address PO BOX 331864

City-State-Zip: MIAMI FL 33233-1864

Title DIRECTOR

Name BLOCK, LISA

Address PO BOX 331864

City-State-Zip: MIAMI FL 33233-1864

Title DIRECTOR

Name GERSHMAN, HARRIET

Address PO BOX 331864

City-State-Zip: MIAMI FL 33233-1864

Title DIRECTOR

Name OSSIP, BOBBI

Address PO BOX 331864

City-State-Zip: MIAMI FL 33233-1864

Title CO- VP GRANTS

Name CRONIN, MONICA

Address PO BOX 331864

City-State-Zip: MIAMI FL 33233-1864

Title DIRECTOR

Name RONDEROS, STEPHANIE

Address PO BOX 331864

City-State-Zip: MIAMI FL 33233-1864