

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000005748

**Entity Name:** FT. MYERS 50+ SENIOR SOFTBALL LEAGUE, INC.**Current Principal Place of Business:**1935 SW 3RD AVE  
CAPE CORAL, FL 33991**Current Mailing Address:**1935 SW 3RD AVE  
CAPE CORAL, FL 33991 US**FEI Number:** 59-3808837**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**HOOVER, GEORGE W  
1935 SW 3RD AVE  
CAPE CORAL, FL 33991 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:** GEORGE HOOVER

01/26/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

|                 |                     |
|-----------------|---------------------|
| Title           | P                   |
| Name            | CACCOLFI, PETE      |
| Address         | 2107 SW 4TH ST      |
| City-State-Zip: | CAPE CORAL FL 33991 |

|                 |                        |
|-----------------|------------------------|
| Title           | VP                     |
| Name            | CAPONIGRO, DOUG        |
| Address         | 3510 MELAGROTTA CIRCLE |
| City-State-Zip: | CAPE CORAL FL 33909    |

|                 |                    |
|-----------------|--------------------|
| Title           | V                  |
| Name            | PARKS, KENNETH     |
| Address         | 8785 FAWN RIDGE DR |
| City-State-Zip: | FT. MYERS FL 33912 |

|                 |                     |
|-----------------|---------------------|
| Title           | T                   |
| Name            | HOOVER, GEORGE      |
| Address         | 1935 SW 3RD AVE     |
| City-State-Zip: | CAPE CORAL FL 33991 |

|                 |                       |
|-----------------|-----------------------|
| Title           | S                     |
| Name            | CECCHINI, PETE        |
| Address         | 744 PONDELLA RD #113  |
| City-State-Zip: | N. FT. MYERS FL 33903 |

*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:** GEORGE WILLIAM HOOVER**TREASURER**

01/26/2021

Electronic Signature of Signing Officer/Director Detail

Date