

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008255

FILED
Jun 06, 2006
Secretary of State

Entity Name: ESCAMBIA HIGH SCHOOL SOFTBALL BOOSTERS, INC.

Current Principal Place of Business:

1310 N 65TH AVENUE
PENSACOLA, FL 32506

New Principal Place of Business:

Current Mailing Address:

1310 N 65TH AVENUE
PENSACOLA, FL 32506

New Mailing Address:

FEI Number: 51-0487647 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DAVIS, MIKE
1310 N 65TH AVENUE
PENSACOLA, FL 32506 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DAVIS, MIKE
Address: 1310 N 65TH AVENUE
City-St-Zip: PENSACOLA, FL 32506

Title: VD () Delete
Name: GRIFFITH, ROBERT K
Address: 1313 SERATINE DRIVE
City-St-Zip: PENSACOLA, FL 32506

Title: TD () Delete
Name: BIGGS, TEDDRA R
Address: 1307 N 48TH AVENUE
City-St-Zip: PENSACOLA, FL 32506

Title: P () Delete
Name: PILGRIM, ROBERT R JR
Address: 1961 FOX QUARRY CIRCLE
City-St-Zip: CANTONMENT, FL 32533

Title: S () Delete
Name: THOMPSON, TAMMY R
Address: 931 N 59TH AVE
City-St-Zip: PENSACOLA, FL 32506

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: TEDDRA R. BIGGS

TD

06/06/2006

Electronic Signature of Signing Officer or Director

_____ Date