

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005714

FILED
Apr 19, 2009
Secretary of State

Entity Name: FLORIDA HALF CENTURY AMATEUR SOFTBALL ASSOCIATION, INC.

Current Principal Place of Business:

6853 CIRCLE CREEK DRIVE
PINELLAS PARK, FL 33781

New Principal Place of Business:

Current Mailing Address:

6853 CIRCLE CREEK DRIVE
PINELLAS PARK, FL 33781

New Mailing Address:

FEI Number: 59-3423029 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PILVER, MICHAEL C SR
6853 CIRCLE CREEK DRIVE
PINELLAS PARK, FL 33781 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: C () Delete
Name: PILVER, MICHAEL C SR
Address: 6853 CIRCLE CREEK DRIVE
City-St-Zip: PINELLAS PARK, FL 33781

Title: V () Delete
Name: LUPO, GEORGE
Address: 125 COUNTRY VILLAS DRIVE
City-St-Zip: SAFETY HARBOR, FL 33572

Title: S () Delete
Name: JONES, DUANE
Address: 14607 BRENTWOOD LANE
City-St-Zip: TAMPA, FL 33618

Title: T () Delete
Name: WORTENDYKE, E.H. BUD
Address: 8140 52ND LANE N
City-St-Zip: PINELLAS PARK, FL 33781

Title: D () Delete
Name: TOWNLEY, JOHN
Address: 913 SE 14TH CT
City-St-Zip: DEERFIELD BEACH, FL 33441

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V (X) Change () Addition
Name: SCHUHMAN, HANK
Address: 1201 SEMINOLE BLVD
City-St-Zip: LARGO, FL 33770

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 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: MICHAEL C. PILVER, SR.

C

04/19/2009

Electronic Signature of Signing Officer or Director

_____ Date