

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005214

FILED
Sep 04, 2005
Secretary of State

Entity Name: J.P.T. GIRLS' FASTPITCH SOFTBALL BOOSTER CLUB, INC.

Current Principal Place of Business:

C/O ANTHONY ABRAMS
CORAL SPRINGS, FL 33071

New Principal Place of Business:

Current Mailing Address:

562 NW 108 AVE
CORAL SPRINGS, FL 33071

New Mailing Address:

FEI Number: 65-0860307 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:

ABRAMS, ANTHONY
562 NW 108 AVE
CORAL SPRINGS, FL 33071 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: P () Delete
Name: ABRAMS, TONY
Address: 562 NW 108 AVE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VP () Delete
Name: BROWN, KEN
Address: 10698 NW 2ND PL
City-St-Zip: CORAL SPRINGS, FL 33071

Title: T () Delete
Name: RUTH, PAM
Address: 11755 SW 1ST STREET
City-St-Zip: CORAL SPRINGS, FL 33071

Title: S () Delete
Name: CONNELL, THERESA
Address: 640 NW 10TH AVE
City-St-Zip: CORAL SPRINGS, FL 33071

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: LEVINE, NEIL
Address: 370 NW 111 AVE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: VP (X) Change () Addition
Name: DEATON, DENNIS JR
Address: 12061 NW 2 DR
City-St-Zip: CORAL SPRINGS, FL 33071

Title: T (X) Change () Addition
Name: BROWN, KEN
Address: 10698 NW 2ND PL
City-St-Zip: CORAL SPRINGS, FL 33071

Title: S (X) Change () Addition
Name: ABRAMS, ANTHONY
Address: 562 NW 108 AVE
City-St-Zip: CORAL SPRINGS, FL 33071

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ANTHONY ABRAMS

S

09/04/2005

Electronic Signature of Signing Officer or Director

Date