

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED

2008 DEC 22 PM 4:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N98000005214 1. Entity Name J.P.T. GIRLS' FASTPITCH SOFTBALL BOOSTER CLUB, INC.	
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Principal Place of Business 8553 NW 8TH COURT C/O SUSAN HUFFMAN CORAL SPRINGS, FL 33071	Mailing Address 8553 NW 8TH COURT C/O SUSAN HUFFMAN CORAL SPRINGS, FL 33071
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2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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12022008 REIN-NP CR2E099 (1/07)

4. FEI Number 65-0860307	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent HUFFMAN, SUSAN 8553 NW 8TH COURT CORAL SPRINGS, FL 33071	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *[Signature]* 12/19/08
Signature typed or printed name of registered agent and title (if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$61.25 After January 1, 2009, Fee will be \$122.50	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		<input type="checkbox"/> Delete
TITLE	P	
NAME	LEVINE, NEIL	
STREET ADDRESS	370 NW 111 AVE	
CITY-ST-ZIP	CORAL SPRINGS, FL 33071	
TITLE	S	
NAME	HUFFMAN, SUSAN A	
STREET ADDRESS	8553 NW 8TH COURT	
CITY-ST-ZIP	CORAL SPRINGS, FL 33071	
TITLE	T	<input checked="" type="checkbox"/> Delete
NAME	LUCAS, STEVE	
STREET ADDRESS	1382 NW 100TH AVE	
CITY-ST-ZIP	CORAL SPRINGS, FL 33071	
TITLE	VP	
NAME	GOMES, ROBYN	
STREET ADDRESS	1236 NW 91ST AVENUE	
CITY-ST-ZIP	CORAL SPRINGS, FL 33071	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	100139204091	
NAME	12/22/08--01051--012 **61.25	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Andrew Ponnock	
STREET ADDRESS	10163 Vestal Court	<input checked="" type="checkbox"/> Addition
CITY-ST-ZIP	Coral Springs, FL 33065	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	REINSTATEMENT	
STREET ADDRESS	2008	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<i>[Signature]</i>	
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* 12/19/08
Signature and typed or printed name of signing officer or director Date Daytime Phone #