

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000005679 (6)

1. Corporation Name

LAKELAND DIAMONDS, GIRLS FASTPITCH SOFTBALL, INC



Principal Place of Business

POST OFFICE BOX 5800
LAKELAND FL 33807

Mailing Address

POST OFFICE BOX 5800
LAKELAND FL 33807

3. Date Incorporated or Qualified
12/14/1993

3a. Date of Last Report
06/07/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number
59-3215446

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RUTENBAR, CHERYL
415 HIBISCUS DRIVE
LAKELAND FL 33803

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Cheryl Rutenbar

(NOTE: Registered Agent signature required when reinstating)

4/29/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN '92

TITLE PD
NAME RUTENBAR, CHERYL
STREET ADDRESS 415 HIBISCUS DRIVE
CITY-ST-ZIP LAKELAND FL 33803 ☒ DELETE

1.1 TITLE Treasurer TD
1.2 NAME Cheryl Rutenbar
1.3 STREET ADDRESS 415 Hibiscus Dr
1.4 CITY-ST-ZIP Lakeland, FL 33803 ☒ Change ☐ Addition

TITLE SD
NAME GEORGES, NANCY
STREET ADDRESS 102 SHADOW LANE
CITY-ST-ZIP LAKELAND FL 33813 ☐ DELETE

2.1 TITLE SD
2.2 NAME Nancy Georges
2.3 STREET ADDRESS 102 Shadow Lane
2.4 CITY-ST-ZIP Lakeland, FL 33813 ☐ Change ☐ Addition

TITLE TD
NAME BROWN, KEN
STREET ADDRESS 3132 HOOFPRIINT LANE
CITY-ST-ZIP LAKELAND FL 33813 ☒ DELETE

3.1 TITLE President PD
3.2 NAME Linda Morgan
3.3 STREET ADDRESS 5919 Myrtle Hill Dr. W.
3.4 CITY-ST-ZIP Lakeland, Florida 33811 ☐ Change ☒ Addition

TITLE VPD
NAME JOHNSON, MIKE
STREET ADDRESS 6315 TIMUCUANS DRIVE
CITY-ST-ZIP LAKELAND FL 33813 ☒ DELETE

4.1 TITLE Vice President VPD
4.2 NAME Gwen Sweet
4.3 STREET ADDRESS 2127 Grove Glen Ln. S.
4.4 CITY-ST-ZIP Lakeland, Florida 33813 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Cheryl Rutenbar Cheryl Rutenbar

4/29/96 941-688-5664

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE DAYTIME PHONE #

CR2E037 (12/95)