

**2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000009019

**Entity Name:** CAPE CORAL SOFTBALL, INC.

**Current Principal Place of Business:**

1502 NE 3RD TERRACE  
CAPE CORAL, FL 33909

**Current Mailing Address:**

P O BOX 151631  
CAPE CORAL, FL 33915

**FEI Number: 03-0493598**

**Certificate of Status Desired: Yes**

**Name and Address of Current Registered Agent:**

FILA, PAUL VMR  
917 SE 26TH ST  
CAPE CORAL, FL 33904 US

*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

**Officer/Director Detail :**

Title            PRES  
Name            FILA, PAUL V  
Address        917 SE 26TH ST  
City-State-Zip: CAPE CORAL FL 33904

Title            VP  
Name            GAZELY, JEFF  
Address        2005 SW EMBERS TERR  
City-State-Zip: CAPE CORAL FL 33991

Title            PUR  
Name            FILA, TERRI M  
Address        224 SW 19TH TERR  
City-State-Zip: CAPE CORA FL 33991

Title            TREASURER  
Name            FULLENKAMP, SUE  
Address        12801 TREELINE CT  
City-State-Zip: N FT MYERS FL 33903

*I hereby 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 all other like empowered.*

**SIGNATURE: PAUL FILA**

**PRESIDENT**

**01/10/2014**

Electronic Signature of Signing Officer/Director Detail

Date