

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000007847

**FILED**  
**Feb 04, 2013**  
**Secretary of State**  
**CC4472865446**

**Entity Name:** COCONUT CREEK GIRLS SOFTBALL INC.

**Current Principal Place of Business:**

4919 NW 47TH AVE  
COCONUT CREEK, FL 33073

**Current Mailing Address:**

4919 NW 47TH AVE  
COCONUT CREEK, FL 33073 US

**FEI Number:** 27-0737594

**Certificate of Status Desired:** No

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

BRODIE, JOHN A  
4919 NW 47TH AVE  
COCONUT CREEK, FL 33073 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 P  
Name BRODIE, JOHN  
Address 4919 NW 47TH AVE  
City-State-Zip: COCONUT CREEK FL 33073

Title VP  
Name FORBES, KEN  
Address 6265 NW 45TH TER  
City-State-Zip: COCONUT CREEK FL 33073

Title SEC  
Name SLADE, JEFF  
Address 4735 NW 76TH ST  
City-State-Zip: COCONUT CREEK FL 33073

Title TREA  
Name DUME, OMAR  
Address 4744 NW 57TH PLACE  
City-State-Zip: COCONUT CREEK FL 33073

Title COO  
Name SACCA, MICHAEL  
Address 4832 NW 54 AVENUE  
City-State-Zip: COCONUT CREEK FL 33073

Title SAFE  
Name GOLDMEN, HOWARD  
Address 6150 NW 60 AVENUE  
City-State-Zip: PARKLAND FL 33067

*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:** JOHN BRODIE

**PRESIDENT**

**02/04/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date