

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N22000013170

**Entity Name:** MOSLEY SOFTBALL BOOSTER, INC.

**Current Principal Place of Business:**

501 MOSLEY DRIVE  
LYNN HAVEN, FL 32444

**Current Mailing Address:**

501 MOSLEY DRIVE  
LYNN HAVEN, FL 32444 US

**FEI Number:** 92-0889434

**Certificate of Status Desired:** No

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

KIRKLAND, TAMMY  
501 MOSLEY DRIVE  
PANAMA CITY, FL 32444 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:** TAMMY KIRKLAND

03/19/2024

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT 2024-2025  
Name            CONNER, DUSTY  
Address        501 MOSLEY DRIVE  
City-State-Zip: LYNN HAVEN FL 32444

Title            S  
Name            CONNER, KRYSTAL  
Address        501 MOSLEY DRIVE  
City-State-Zip: LYNN HAVEN FL 32444

Title            T  
Name            KIRKLAND, TAMMY  
Address        501 MOSLEY DRIVE  
City-State-Zip: LYNN HAVEN FL 32444

Title            VP  
Name            PEARSON, NATALIE  
Address        501 MOSLEY DRIVE  
City-State-Zip: LYNN HAVEN FL 32444

Title            2023-2024 PRESIDENT  
Name            HAGLER, PRISCILLA  
Address        501 MOSLEY DRIVE  
City-State-Zip: PANAMA CITY FL

*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:** TAMMY KIRKLAND

**TREASURER**

03/19/2024

Electronic Signature of Signing Officer/Director Detail

Date