

**2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Oct 04, 2006**  
**Secretary of State**

DOCUMENT# 739191

**Entity Name:** NORTH BREVARD YOUTH SOFTBALL ASSOCIATION, INC.**Current Principal Place of Business:**P.O. BOX 1118  
TITUSVILLE, FL 32781 US**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 1118  
TITUSVILLE, FL 32781 US**New Mailing Address:****FEI Number:** 59-3212211**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**OXENDINE, TERESA  
3825 GOLDEN SHORES BLVD.  
MIMS, FL 32754 US**Name and Address of New Registered Agent:**SMITH, DON  
4115 FOX LAKE ROAD  
TITUSVILLE, FL 32796 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: DON SMITH

10/04/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PR ( ) Delete  
Name: OXENDINE, TERESA  
Address: 3825 GOLDEN SHORES BLVD.  
City-St-Zip: MIMS, FL 32754

Title: TR ( ) Delete  
Name: CALDWELL, SUSAN  
Address: 570 ORA DELL AVE.  
City-St-Zip: TITUSVILLE, FL 32796

Title: SEC ( ) Delete  
Name: SMITH, SHANNON  
Address: 148 MCNEELA PLACE  
City-St-Zip: TITUSVILLE, FL 32796

Title: VP ( ) Delete  
Name: SIMPSON, JOHN  
Address: 2525 FAWN LAKE BLVD.  
City-St-Zip: MIMS, FL 32754

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PR (X) Change ( ) Addition  
Name: SMITH, DON  
Address: 4115 FOX LAKE ROAD  
City-St-Zip: TITUSVILLE, FL 32796

Title: TR (X) Change ( ) Addition  
Name: BEAM, MILLIE  
Address: 6725 ANECIA AVE.  
City-St-Zip: COCOA, FL 32927

Title: SEC (X) Change ( ) Addition  
Name: DUFF, CONNIE  
Address: 3137 LIONEL ROAD  
City-St-Zip: MIMS, FL 32754

Title: VP (X) Change ( ) Addition  
Name: BLICKLEY, DANA  
Address: 3425 HERON LANE  
City-St-Zip: TITUSVILLE, FL 32780

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DON SMITH

PR

10/04/2006

Electronic Signature of Signing Officer or Director

Date