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AND  
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96 FEB 20 PM 12:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



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

**DOCUMENT # 751423 (5)**

1. Corporation Name

**ROCK-CO GIRLS SLOW PITCH LEAGUE, INC.**

Principal Place of Business

Mailing Address

P.O. BOX 7016  
ROCKLEDGE FL 32955

P.O. BOX 7016  
ROCKLEDGE FL 32955

3. Date Incorporated or Qualified

03/06/1980

3a. Date of Last Report

04/10/1995

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MOORE, VANESSA  
1002 MONTCLAIR ROAD  
COCOA FL 32922

81

Name **KAYE L. SALORIO**

82

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

**1480 S. Lester Court**

83

84

City **Merritt Island**

FL

85

Zip **32952**

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

**KAYE L. SALORIO, President**

**Kaye L. Salorio January 19, 1996**

12. OFFICERS AND DIRECTORS

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

TITLE ☒ DELETE

NAME **PD VANESSA MOORE**  
STREET ADDRESS **1002 MONTCLAIR RD**  
CITY-ST-ZIP **COCOA FL**

TITLE ☐ DELETE

NAME **SD SALORIO, KAYE**  
STREET ADDRESS **1480 S LESTER CORUT**  
CITY-ST-ZIP **MERRITT ISLAND FL**

TITLE ☒ DELETE

NAME **TD ONDREA, SHARON**  
STREET ADDRESS **1713 LA MARCHE DRIVE**  
CITY-ST-ZIP **COCOA FL**

TITLE ☐ DELETE

NAME **VPO WARTELL, KAY**  
STREET ADDRESS **3803 PARAPET DRIVE**  
CITY-ST-ZIP **COCOA FL**

TITLE ☒ DELETE

NAME **VPD WETHERINGTON, RICK**  
STREET ADDRESS **3462 ECHO RIDGE**  
CITY-ST-ZIP **COCOA FL**

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

1.1 TITLE

**VD**

1.2 NAME

**Hutchinson, Melissa**

1.3 STREET ADDRESS

**441 Sandollar Lane**

1.4 CITY-ST-ZIP

**Cocoa, FL 32922**

2.1 TITLE

**PD/SD**

2.2 NAME

**SALORIO, KAYE**

2.3 STREET ADDRESS

**1480 S. Lester Ct.**

2.4 CITY-ST-ZIP

**Merritt Island, FL 32952**

3.1 TITLE

**HART, Terri (TD)**

3.2 NAME

**4108 Fisherman's Place**

3.3 STREET ADDRESS

**Cocoa, FL 32926**

3.4 CITY-ST-ZIP

4.1 TITLE

**VD**

4.2 NAME

**Wartell, Kay**

4.3 STREET ADDRESS

**3803 Parapet Dr.**

4.4 CITY-ST-ZIP

**Cocoa, FL 32926**

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

**200001720502**

**-02/21/96--01061--002**

**\*\*\*\*\*70.00 \*\*\*\*\*70.00**

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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: **Kaye L. Salorio** **KAYE L. SALORIO**

**01/19/96**

**(407)453-6800**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)