

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 17 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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: P.O. BOX 7016, ROCKLEDGE FL 32955  
Mailing Address: P.O. BOX 7016, ROCKLEDGE FL 32955-7016

3. Date Incorporated or Qualified: 03/06/1980  
3a. Date of Last Report: 02/20/1996

2. Principal Place of Business: 21 Rock Co Softball League  
22 Suite, Apt. #, etc.  
23 City & State  
24 Zip Country

4. FEI Number: NOT APPLICABLE  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing:  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SALORIO, KAYE L  
1480 S. LESTER COURT  
MERRITT ISLAND FL 32952

81 Name: KAYE L. SALORIO  
82 Street Address (P.O. Box Number is Not Acceptable): 1480 S. LESTER COURT  
83 City: Merritt Island  
84 City: FL 85 Zip Code: 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 KAYE L. SALORIO DATE: 2/7/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	VD	<input type="checkbox"/> DELETE
NAME	HUTCHINSON, MELISSA	
STREET ADDRESS	441 SANDDOLLAR LANE	
CITY - ST - ZIP	COCOA FL 32922	
TITLE	PSD	<input type="checkbox"/> DELETE
NAME	SALORIO, KAYE	
STREET ADDRESS	1480 S. LESTER COURT	
CITY - ST - ZIP	MERRITT ISLAND FL 32952	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	HART, TERRI	
STREET ADDRESS	4108 FISHERMAN'S PLACE	
CITY - ST - ZIP	COCOA FL 32926	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	WARTELL, KAY	
STREET ADDRESS	3803 PARAPET DRIVE	
CITY - ST - ZIP	COCOA FL 32926	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

1.1 TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Donald Vest	
1.3 STREET ADDRESS	1917 Woodhaven Cir. #98	
1.4 CITY - ST - ZIP	Rockledge, FL 32955	
2.1 TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	KAYE SALORIO	
2.3 STREET ADDRESS	1480 S. LESTER COURT	
2.4 CITY - ST - ZIP	Merritt Island, FL 32952	
3.1 TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	TAMMY VEST	
3.3 STREET ADDRESS	1917 Woodhaven Cir. #98	
3.4 CITY - ST - ZIP	Rockledge, FL 32955	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 DATE: 2-7-97 407-453-6800

CR2E037 (9/96)