FILE NOW: FILING FEE IS \$61.25

NONBROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

751423

(5)

ROCK-CO GIRLS SLOW PITCH LEAGUE, INC.

VEST, DONALD

ROCKLEDGE FL

VEST, TAMMY

ROCKLEDGE FL

1917 WOODHAVEN CIR #98

1917 WOODHAVEN CIR #98

NAME

TITLE .

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

FILED May 19 1998 8:00am Secretary of State

Principal Place	e of Business	Mailing Address					4 I MANTIN CARBUS BILIALI KIRBIN BERBUR ATTIN BIRBIN ATBUS ATBUS BERBUN BERBUN ATBUS BERBUN ATBU				
ROCK CO SOFT PO BOX 7016 ROCKLEDGE FL		P.O. BOX 7016 ROCKLEDGE FL 32955				-	3. Date Incorporated or Qualified 03/06/1980 4. FEI Number Applied For				
US							NOT APPLICABL	E		ot Applicable	
2. Principal Place of Business			2a. Mailing Address 26					Certificate of Status Desired Section			
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.					6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees				
City & State	0	City & State					7. Is this nonprofit corporation a homeowners association?				
Zip 24	2	Country 5	Zip Cou 29 30			try		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No			
9. Name and Address of Current Registered Agent								10. Name and Address of N	ew Registered	Agent	
					'	31 Name	Kay	y Wartell			
SALORIO, KAYE L 82 Street Address							Address	s (P.O. Box Number is Not Ac			
1480 S. LESTER COURT MEDDITT ISLAND EL 22062							_380	03 Parapet Dr	ve _		
MERRITT ISLAND FL 32952											
84 City							Co	ocoa	Fl	_ 85 3 ⁷ 000	26
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation of the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation of the provision of the second sections of the second section sections of the second section sections of the second sections of the section section section sections of the second section sections of the section sections of the section section section sections of the section section section sections of the section sec								ation submits this statement for	r the purpose of	of changing it	s registered
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.								is board of directors. Thereby	accept the ap	pontinont as	registered
SIGNATURE Signature typed or printed name of rejustered agent and title if applicable (NOTE: Registered Agent signature require							o roo ikod w	whos seinetating)	4131	78	
12.	Sign Bulg. Typied bi	OFFICERS AND		(CM) OII	13.	Agoni signature	e induien e	ADDITIONS/CHANGES TO	OFFICERS AN	D_DIBECTOR	S IN 12
TITLE	VD			DELETE	1.1 TITL	E	Ţ ,			Change	Addition
NAME	HUTCHIN	SON, MELISSA			1.2 NAN	ME .],				
STREET ADDRESS	***************************************				1.3 STR	EET ADORESS					
CITY-ST-ZIP	<u>C</u> OCOA F	L 32922			1.4 CIT	r-ST-ZIP					<i>2</i>
TITLE	PSD	· · · · · · · · · · · · · · · · · · ·		J DELETE	2.1 TITL	Ę	SD	•	•	X Change	Addition
NAME	\$ALORIO,				2.2 NAA	IE	Sal	lorio, Kaye			
STREET ADDRESS		ESTER COURT			2.3 STR	EET ADDRESS	1148	30 S. Dester C	ourt		-
CITY-ST-ZIP		SLAND FL 32952		- 127		Y-ST-ZIP	Mer	ritt Island,	F1-329	52	
TITLE	TD AN ADM	MAUF	2	DELETE	3.1 TITL		TD	•	•	Change	Addition
NAME	SALORIA,		•		3.2 NAN	=	old	lham, Jamie			,
STREET ADDRESS	14805 LES					EET ADDRESS	155	0 Hiddenwood			-
CITY-ST-ZIP	COCOA F	<u>L</u>	·	DELETE	3.4. GIT 4.1 TITL	Y-ST-ZIP	عمعا	02F1_32926_		X Change	Addition
NAME	WARTELL.	KAV		percit	4.1 HIL		PSD			X Change	- Managar
		APET DRIVE						tell, Kay			
STREET ADDRESS	COCOA F					EET ADDRESS.		3 Parapet Dri		•	
CITY-ST-ZIP	5h	L 02920		AFLETE	5.1 TITL	'-ST-ZIP	15°C	oa, Fl <u>32926</u>		Change	T Addition

14. Thereby 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 ennual 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.

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

Vest; Donald

9667Baybenry Lanes:

Rockledge, Fl 32955

4/2/98

(407)632-200

___ Addition

CR2E037 (10/9)