## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 762471** 

FILED May 02, 2007 Secretary of State

Entity Name: OSCEOLA YOUTH SOFTBALL LEAGUE, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

3501 BAKER DRIVE KISSIMMEE, FL 34742 US

**Current Mailing Address: New Mailing Address:** 

P.O. BOX 422131 KISSIMMEE, FL 347422131 US

FEI Number: 59-2227036 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

RITCH, JOHN B. 100 CHURCH STREET KISSIMMEE, FL 32741 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:

Date

Electronic Signature of Registered Agent

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition LIGON, REBECCA I LIGON, REBECCA I Name: Name: 1842 W. VIRGINIA DR. Address: 1842 W. VIRGINIA DR. Address: City-St-Zip: KISSIMMEE, FL 34744 US City-St-Zip: KISSIMMEE, FL 34744 US

Title: PD () Delete Title: SEC (X) Change ( ) Addition Name: CLANCY, JODY Name: CLANCY, JODY

Address: 1425 SUGAR CANE DR. Address: 1425 SUGAR CANE DR. City-St-Zip: KISSIMMEE, FL 34744 US City-St-Zip: KISSIMMEE, FL 34744 US

Title: VD. () Delete Title: **PRES** (X) Change ( ) Addition HADERLE, AARON HADERLE, AARON Name: Name:

2400 CYPRESS LANE 2400 CYPRESS LANE Address: Address: City-St-Zip: KISSIMMEE, FL 34746 US City-St-Zip: KISSIMMEE, FL 34746 US

( ) Delete Title: Title: ( ) Change (X) Addition

Name: Name: KODY, CHRISTOPHER 4129 BALD EAGLE DR Address: Address: City-St-Zip: City-St-Zip: KISSIMME, FL 34746

I hereby certify that the information supplied with this filing does not qualify 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: REBECCA I LIGON **TRES** 05/02/2007