DOCU	MENT # 765271					FILED			
	sco girl's softball le/	GUE OF ZEPHY	RHILLS			25 PM 12:			
	ce of Business	Mailing Address	·	COD WE T		TARY OF ST Assee, FLO	ATE IRIDA		
26 KRUSEN O BOX 15		P O BOX 15 PO BOX 15 ZEPHRYHILLS FL 33539-0015 US							
Principal P	Place of Business	3. Mailing Addres	s						
Suite, Apt. #, etc. City & State		Suite, Apt. #, etc.				03-09-03 9013 023 #61.25			
		City & State		<u></u>		4. FEI Number 59-2772110		Applied For Not Applicable	
Zip	Country	Zip	Col	untry	5. Certificate of St		See Require	Iditional	
, <u>, _ , , , , , , , , , , , , , , , , ,</u>	6. Name and Address of Curre	nt Registered Agent-		Name		ress of New Regis	itered Agent	÷	
	, CLARENCE E LLMAN ST				Street Address (P.O. Box Number is Not Acceptable)				
ZEPHYRH	HILLS FL 33540								
The above the obligat	e named entity submits this statement tions of registered agent. Signatur, typed or printed name of registered ag	ent and title if applicable. 9. Elect	(NOTE: Registered	Financing	required when reinstating)	Make	DATE Check Payable	, and accept	
The above the obligat GNATURE	e named entity submits this statement tions of registered agent. Signature, typed or printed name of registered ag FILE NOW: FEE IS \$61.25 tember 10, 2003, min will be	ent and the if applicable. \$236.25 9. Elec Trus	(NOTE: Registered tion Campaign F	ed office or re	\$ required when reinstating) \$5.00 May Be Added to Fees	Make Florida I	L am familiar with	and accept	
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