## 2007 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## **FILED** Jan 29, 2007 8:00 am Secretary of State

				01 00 0007 00000 012 ****** 25
DOCUMENT # N0000001159  1. Entity Name WELLINGTON FASTPITCH SOFTBALL ASSOCIATION, INC.				01-29-2007 90092 013 ****61.25
13618 BRIGHTSTONE STREET 136		Mailing Address 13618 BRIGHTSTONE STR WELLINGTON, FL 33414	REET	60009164
2. Principal Place of Business - No P.O. Box #		3. Mailing Address		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		01242007 Chg-NP CR2E037 (12/06)
City & State		City & State		4. FE! Number Applied For 65-0985442 Not Applicable
Zip	Country	Zip	Country	5. Certificate of Status Desired See Required Fee Required
	6. Name and Address of Current	Registered Agent	<u> </u>	7. Name and Address of New Registered Agent
HOUSEHOLDER, MICHAEL				
			Street Ad	Address (P.O. Box Number is Not Acceptable)
***************************************	7011,12 00111		Į.	
			City	FL Zip Code
the obligat	named entity submits this statement to ions of registered agent.  Standard typed or printed name of registered agent.	McClean	<u>.                                    </u>	or registered agent, or both, in the State of Florida. I am familiar with, and accept the state of Florida and accept the state of Florida. I am familiar with, and accept the state of Florida. I am familiar with, and accept
	Filing Fee is \$61.25 Due by May 1, 2007	9. Election Campa Trust Fund Conf		\$5.00 May Be Added to Fees Make check payable to Florida Department of State
10.	OFFICERS AND DIF	RECTORS	11.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD. MCCLEARY, CHRISTINE 1 ARCH DRIVE LAKE WORTH, FL 33465	☐ Delete	TITLE NAME STREET ADDRESS CITY ST-ZIP	President Ruth Martinez-Esks a55 Alpine West Palm Brach Fl 3340 5
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HOUSEHOLDER, MICHAEL 13618 BRIGHTSTONE STREET WELLINGTON, FL 33414	☐ Delete	TITLE NAME STREET ADDRESS CHY-ST-ZIP	E Treasurer McCleary Dehange Addition
NAME STREET ADDRESS CITY ST-ZIP	S CHEATEM, MARRYANN 1920 SOUTH CLUB DR., FL 33414	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change Additio
TITLE NAME STREET ADDRESS CHY-ST-ZIP	D COLLIER, KEVIN 11700 WATERBEND CT. WELLINGTON, FL 33414	☐ Delete	NTLE NAME STREET ADDRESS CITY ST-ZIP	Robert Poyner Schange Addition 15789 Cypress Chase Wellington Fl 33414
NAME SIREEI ADDRESS CITY-ST-ZIP	D LAY, TRACY 4747 45TH STREET WEST PALM BEACH, FL 33407	☐ Defete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addilio
ITLE NAME STREET ADDRESS CITY ST-ZIP	D MULLINS, JAMES 3940 DIAMONDCHIP CT. WELLINGTON, FL 33414	☐ Delete	TITLE NAME STREET ADDRESS CITY ST-ZIP	Neil Dickerman Thange Addition 520 Cypress Cross Wellington El 33414

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

- 31 - 07 239 - 6193

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR