

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000006364

FILED
Nov 15, 2004
Secretary of State**Entity Name:** WEST PINES GIRLS SOFTBALL, INC.**Current Principal Place of Business:**C/O ROBERT STAUFFER
18013 SW 13 ST.
PEMBROKE PINES, FL 33029**New Principal Place of Business:****Current Mailing Address:**PO BOX 822655
SOUTH FLORIDA, FL 330822655**New Mailing Address:****FEI Number:** 65-1111593 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
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:**STAUFFER, ROBERT
18013 SW 13 ST.
PEMBROKE PINES, FL 33029 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** DP () Delete
Name: STAUFFER, ROBERT
Address: 18013 SW 13 ST.
City-St-Zip: PEMBROKE PINES, FL 33029**Title:** DV () Delete
Name: FADUL, THOMAS G JR
Address: 220 NW 204 AVE
City-St-Zip: PEMBROKE PINES, FL 33029**Title:** DT () Delete
Name: TUCKER, KATHRINE
Address: 220 NW 204 AVE.
City-St-Zip: PEMBROKE PINES, FL 33029**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ROBERT STAUFFER

PRES

11/15/2004

Electronic Signature of Signing Officer or Director

Date