

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003963

FILED  
Jan 12, 2007  
Secretary of State

Entity Name: MISS NORTH PORT FASTPITCH SOFTBALL, INC.

## Current Principal Place of Business:

PO BOX 7521  
NORT PORTH, FL 34287

## New Principal Place of Business:

NARRAMORE SOFTBALL COMPLEX  
NORT PORTH, FL 34287

## Current Mailing Address:

PO BOX 7521  
NORT PORTH, FL 34287

## New Mailing Address:

FEI Number: 47-0869445      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

WILSON, M. MARIE ESQ  
13801 S TAMIAMI TRAIL SUITE D  
NORTH PORT, FL 34287      US

## Name and Address of New Registered Agent:

FRACASSI, GARY CPA  
218 S. BUMBY AVE  
ORLANDO, FL 32803      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: GARY FRACASSI

01/12/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: DP      ( ) Delete  
Name: FANNING, BECKY D  
Address: 6136 JOE JEFF ST.  
City-St-Zip: NORTH PORT, FL 34286

Title: S      ( ) Delete  
Name: AYRES, JENNIFER  
Address: 5292 TREKELL ST.  
City-St-Zip: NORTH PORT, FL 34287

Title: VP      (X) Delete  
Name: SCHICK, JAMES R  
Address: 3794 HOLIN LANE  
City-St-Zip: NORT PORTH, FL 34287

Title: T      (X) Delete  
Name: FANNING, BECKY D  
Address: 6136 JOE JEFF ST.  
City-St-Zip: NORTH PORT, FL 34286

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P      (X) Change ( ) Addition  
Name: MONEY, GERALD W  
Address: 3705 ULMAN AVE  
City-St-Zip: NORTH PORT, FL 34286

Title: VP      (X) Change ( ) Addition  
Name: SCHICK, JAMES R  
Address: 3794 HOLIN  
City-St-Zip: NORTH PORT, FL 34287

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 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: GERALD W. MONEY

PRES

01/12/2007

Electronic Signature of Signing Officer or Director

Date