## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02000005821

FILED Apr 14, 2008 Secretary of State

Entity Name: TAMARAC CO-FD SOFTBALL INC.

Name and Address of Current Registered Agent:  MCCANN, KEVIN PRES 8289 CASSIA TERRACE TAMARAC, FL 33321 US  The above named entity submits this statement for the purpose of changing its registered office or registered agin the State of Florida.  SIGNATURE:  Electronic Signature of Registered Agent  Date	Entity Na	ame: LAMARA	AC CO-ED SOFTBALL INC.			
Current Mailing Address:  Rew Mailing Address:  New Mailing Address:  Razes CASSIA TERRACE TAMARAC, FL 33321  FEI Number: 27-0024889 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status for Name and Address of Current Registered Agent:  Name and Address of Current Registered Agent:  Name and Address of New Registered Agent:  Name and Address of New Registered Agent  Name and Address an	Current Principal Place of Business:			New Principal Place	of Business:	
8289 CASSIA TERRACE TAMARAC, FL 33321  FEI Number: 27-0024889 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status II  Name and Address of Current Registered Agent:  Name and Address of New Registered Age MCCANN, KEVIN PRES 8289 CASSIA TERRACE TAMARAC, FL 33321 US  The above named entity submits this statement for the purpose of changing its registered office or registered agin the State of Florida.  SIGNATURE:    Electronic Signature of Registered Agent			Ē			
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Name and Address of Current Registered Agent:  MCCANN, KEVIN PRES 8289 CASSIA TERRACE TAMARAC, FL 33321 US  The above named entity submits this statement for the purpose of changing its registered office or registered agin the State of Florida.  SIGNATURE:    Electronic Signature of Registered Agent   Date    OFFICERS AND DIRECTORS:   ADDITIONS/CHANGES TO OFFICERS ANI Title: () Change () Addition Name: MCCANN, KEVIN Name: MCCANN, KEVIN Name: Address: 8289 CASSIA TERRACE Address: City-St-Zip: TAMARAC, FL 33321 City-St-Zip: Title: () Change () Addition Name: RODRIGUEZ, CHRIS Name: S235 N.W.54TH SREET Address: City-St-Zip: Title: SECR () Delete Title: () Change () Addition Name: MIZUSAWA, PENNY Name: MIZUSAWA, PENNY Name: MIZUSAWA, PENNY Name: Address: 8109 N.W. 95TH LANE Address: City-St-Zip: TAMARAC, FL 33321 City-St-Zip: Title: TREA () Delete Title: () Change () Addition Name: Address: Rodress: City-St-Zip: Tamara, FL 33321 City-St-Zip: Title: TREA () Delete Title: () Change () Addition Name: Address: Rodress: City-St-Zip: Title: TREA () Delete Title: () Change () Addition Name: VALDES, PATRICIA Name: Address: Rodress: Rodress			<u> </u>			
MCCANN, KEVIN PRES 8289 CASSIA TERRACE TAMARAC, FL 33321 US  The above named entity submits this statement for the purpose of changing its registered office or registered agin the State of Florida.  SIGNATURE:    Electronic Signature of Registered Agent   Date    OFFICERS AND DIRECTORS:   ADDITIONS/CHANGES TO OFFICERS ANI Title: PRES () Delete   Title: () Change () Addition   Name: MCCANN, KEVIN   Name:   Address: 8289 CASSIA TERRACE   Address:   City-St-Zip: TAMARAC, FL 33321   City-St-Zip:   Title: VP () Delete   Title: () Change () Addition   Name: RODRIGUEZ, CHRIS   Name:   Address: 5235 N.W, 547H SREET   Address:   City-St-Zip: COCONUT CREEK, FL 33073   City-St-Zip:   Title: SECR () Delete   Title: () Change () Addition   Name: MIZUSAWA, PENNY   Name:   Address: 8109 N.W. 95TH LANE   Address:   City-St-Zip: TAMARAC, FL 33321   City-St-Zip:   Title: TREA () Delete   Title: () Change () Addition   Name: VALDES, PATRICIA   Address:   Title: TREA () Delete   Title: () Change () Addition   Name: VALDES, PATRICIA   Name:   Name: VALDES, PATRICIA   Name:   Name: VALDES, PATRICIA   Address:   Title: TREA () Delete   Title: () Change () Addition   Name: VALDES, PATRICIA   Address:   Title: TREA () Delete   Title: () Change () Addition   Name: VALDES, PATRICIA   Name:   Name: VALDES, PATRICIA   Address:   Title: TREA () Delete   Title: () Change () Addition   Name: VALDES, PATRICIA   Address:   The statement of Florida   Participation   The statement of Florida   Part	FEI Number	r: 27-0024889	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
8289 CASSIA TERRACE TAMARAC, FL 33321 US  The above named entity submits this statement for the purpose of changing its registered office or registered age in the State of Florida.  SIGNATURE:    Electronic Signature of Registered Agent	Name and	d Address of	Current Registered Agent:	Name and Address o	of New Registered Agent:	
in the State of Florida.    SIGNATURE:	8289 CAS TAMARA	SSIA TERRACE C, FL 33321	US	purpose of changing its registere	d office or registered agent, or both,	
Electronic Signature of Registered Agent  OFFICERS AND DIRECTORS:  ADDITIONS/CHANGES TO OFFICERS ANI Title: PRES () Delete Name: MCCANN, KEVIN Address: 8289 CASSIA TERRACE City-St-Zip: TAMARAC, FL 33321  Title: VP () Delete Name: RODRIGUEZ, CHRIS Address: 5235 N.W.54TH SREET City-St-Zip: City-St-Zip: City-St-Zip: City-St-Zip: City-St-Zip: City-St-Zip: City-St-Zip: City-St-Zip: COCONUT CREEK, FL 33073  Title: SECR () Delete Name: MIZUSAWA, PENNY Name: Address: 8109 N.W. 95TH LANE City-St-Zip: Title: TREA () Delete Name: Name: VALDES, PATRICIA Address: 8109 N.W. 94TH LANE Address:				,p		
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Title: PRES () Delete Title: () Change () Addition Name: MCCANN, KEVIN Name: Address: 8289 CASSIA TERRACE Address: City-St-Zip: TAMARAC, FL 33321 City-St-Zip:  Title: VP () Delete Title: () Change () Addition Name: RODRIGUEZ, CHRIS Name: Address: 5235 N.W.54TH SREET Address: City-St-Zip: COCONUT CREEK, FL 33073 City-St-Zip:  Title: SECR () Delete Title: () Change () Addition Name: MIZUSAWA, PENNY Name: Address: 8109 N.W. 95TH LANE Address: City-St-Zip: TAMARAC, FL 33321 City-St-Zip:  Title: TREA () Delete Title: () Change () Addition Name: Address: 8109 N.W. 95TH LANE Title: () Change () Addition Name: Address: 8109 N.W. 95TH LANE Address: 8109 N.W. 94TH LANE Address: 8109 N.W. 94TH LANE Address: 8109 N.W. 94TH LANE				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Name:         RODRIGUEZ, CHRIS         Name:           Address:         5235 N.W.54TH SREET         Address:           City-St-Zip:         City-St-Zip:    Title:  SECR () Delete  Title: () Change () Addition  Name:  Name:  Address:  8109 N.W. 95TH LANE  City-St-Zip:  TAMARAC, FL 33321  City-St-Zip:  Title:  TREA () Delete  Title: () Change () Addition  Name:  Name:  Address:  8109 N.W. 94TH LANE  Address:  8109 N.W. 94TH LANE  Address:  Address:  Address:  City-St-Zip:	Title: Name: Address:	PRES ( MCCANN, KEV 8289 CASSIA	) Delete /IN TERRACE	Title: Name: Address:		
Name:         MIZUSAWA, PENNY         Name:           Address:         8109 N.W. 95TH LANE         Address:           City-St-Zip:         TAMARAC, FL 33321         City-St-Zip:           Title:         TREA () Delete         Title: () Change () Addition           Name:         VALDES, PATRICIA         Name:           Address:         8109 N.W. 94TH LANE         Address:	Name: Address:	RODRIGUEZ, 5235 N.W.54T	CHRIS H SREET	Name: Address:	( ) Change ( ) Addition	
Name: VALDES, PATRICIA Name: Address: 8109 N.W. 94TH LANE Address:	Name: Address:	MIZUSAWA, P 8109 N.W. 95	ENNY	Name:	( ) Change ( ) Addition	

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: KEVIN MCCANN PRES 04/14/2008