# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 15, 2004 08:00 AM**
**Secretary of State**

DOCUMENT # N02000007919

1. Entity Name
ORLANDO NO FEAR LADIES SOFTBALL,INC.

| Principal Place of Business | Mailing Address |
|---|---|
| 4041 TERIWOOD AVENUE<br>ORLANDO, FL 32812 | 4041 TERIWOOD AVENUE<br>ORLANDO, FL 32812 |

**DO NOT WRITE IN THIS SPACE**

03162004 No Chg-NP CR2E037 (10/03)

4. FEI Number
46-0503090
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

BAILEY, JOHN G
4041 TERIWOOD AVENUE
ORLANDO, FL 32812

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: John G. Bailey 4-12-04
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is $61.25**
**Due by May 1, 2004**

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000114508
04/15/04-80053-005 70.00

10. OFFICERS AND DIRECTORS

| | |
|---|---|
| TITLE | PD |
| NAME | BAILEY, JOHN G |
| STREET ADDRESS | 4041 TERIWOOD AVENUE |
| CITY-ST-ZIP | ORLANDO, FL 32812 |
| TITLE | VPD |
| NAME | BAILEY, LISA L |
| STREET ADDRESS | 4041 TERIWOOD AVENUE |
| CITY-ST-ZIP | ORLANDO, FL 32812 |
| TITLE | TD |
| NAME | CAREY, JERRY |
| STREET ADDRESS | 3806 GATLIN WOODS DR. |
| CITY-ST-ZIP | ORLANDO, FL 32812 |
| TITLE | SD |
| NAME | CAREY, SANDRA |
| STREET ADDRESS | 3806 GATLIN WOODS DR. |
| CITY-ST-ZIP | ORLANDO, FL 32812 |
| TITLE | VPD |
| NAME | WISIAK, GARY |
| STREET ADDRESS | 5433 WINFREE DR. |
| CITY-ST-ZIP | ORLANDO, FL 32812 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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12. I hereby certify that the information supplied with this filing does not qualify 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 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:** Jerry R Carey Jerry R Carey 4-12-2004 4073251613
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #