

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000000235

FILED
Jan 10, 2009
Secretary of State

Entity Name: NAPLES GIRLES SOFTBALL LITTLE LEAGUE, INC.

Current Principal Place of Business:

603 PARK STREET
NAPLES, FL 34102

New Principal Place of Business:

Current Mailing Address:

1655 THIRD STREET SOUTH
NAPLES, FL 34102

New Mailing Address:

FEI Number: 51-0442964

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WHITE, JOHN P
3431 PINE RIDGE RD STE 101
NAPLES, FL 34109 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: D () Delete
Name: PROSSER, RHONDA
Address: 10440 REGENT CIRCLE
City-St-Zip: NAPLES, FL 34109

Title: D () Delete
Name: GRAY, ANA
Address: 44 CAVEPIT DR
City-St-Zip: NAPLES, FL 34108

Title: D () Delete
Name: BALL, DAVID
Address: 1655 THIRD STREET SOUTH
City-St-Zip: NAPLES, FL 34102

Title: D () Delete
Name: IAMURRI, ROBERT
Address: 2722 14TH ST N
City-St-Zip: NAPLES, FL 34103

Title: D () Delete
Name: SCOONE, KRIS
Address: 621 107TH AVE N
City-St-Zip: NAPLES, FL 34108

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: SCOONE, KRIS
Address: 621 107TH AVE. N.
City-St-Zip: NAPLES, FL 34108

Title: D (X) Change () Addition
Name: RUSHING, TIM
Address: 4275 NORTH ROAD
City-St-Zip: NAPLES, FL 34104

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BENDER, CHUCK
Address: 278 STANHOPE CIRCLE
City-St-Zip: NAPLES, FL 34104

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: DAVID BALL

D

01/10/2009

Electronic Signature of Signing Officer or Director

Date