2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003036

Apr 04, 2008 Secretary of State

Entity Name: NORTHEAST FLORIDA GIRLS SOFTBALL, INC.

Current Principal Place of Business: New Principal Place of Business: 500 SOUTH PENMAN ROAD JACKSONVILLE BEACH, FL 32250 **Current Mailing Address: New Mailing Address:** 14289-19 BEACH BLVD. #202 JACKSONVILLE, FL 32250 FEI Number: 56-2354099 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HARGETT, DEE F 500 SOUTH PENMAN ROAD JACKSONVILLE BEACH, FL 32250 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BAXTER, JOHN Name: Name: 606 16TH AVENUE NORTH Address: Address: City-St-Zip: JACKSONVILLE BEACH, FL 32250 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: CURTIS, MELISSA Name: BAUMAN, JESSIE L Address: 12865 ELLIS ISLAND DRIVE Address: 12917 RIVERMIST WAY City-St-Zip: JACKSONVILLE, FL 32224 City-St-Zip: JACKSONVILLE, FL 32224 () Delete Title: Title: () Change () Addition HUME, DON Name: Name: 4431 RICHMOND PARK CIRCLE Address: Address: City-St-Zip: JACKSONVILLE, FL 32224 City-St-Zip: Title: () Delete Title: (X) Change () Addition GADLEY, WILLIAM Name: Name: JONES, KEVIN Address: 11950 WALLE DRIVE Address: 986 CELEBRANT DRIVE City-St-Zip: JACKSONVILLE, FL 32246 City-St-Zip: JACKSONVILLE, FL 32225 VΡ Title: () Delete Title: (X) Change () Addition MCLOED, DOUG RIDDLE, RICHARD Name: Name: 1216 NORTH 10TH STREET 2343 GLADE SPRINGS DRIVE Address: Address: City-St-Zip: JACKSONVILLE BEACH, FL 32250 City-St-Zip: JACKSONVILLE, FL 32246 Title: () Delete Title: () Change (X) Addition DOWNEY, TERRY Name: Name: Address: Address: 14309 LACKMAN LANE JACKSONVILLE BEACH, FL 32250 City-St-Zip: City-St-Zip:

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: JESSIE LYNN BAUMAN T 04/04/2008