

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006524

FILED
Feb 04, 2009
Secretary of State

Entity Name: SOUTH FLORIDA SENIOR SOFTBALL SOCIAL CLUB, INC.

Current Principal Place of Business:

1280 NORTH CONGRESS AVENUE #107
WEST PALM BEACH, FL 33409

New Principal Place of Business:

Current Mailing Address:

1280 NORTH CONGRESS AVENUE #107
WEST PALM BEACH, FL 33409

New Mailing Address:

FEI Number: 81-0625902

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KURTZ, JOHN
1280 NORTH CONGRESS AVENUE #107
WEST PALM BEACH, FL 33409 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: DUNCAN, STANLEY
Address: 11615 63RD LANE NORTH
City-St-Zip: ROYAL PALM BEACH, FL 33412

Title: D (X) Delete
Name: GONZALEZ, ROLANDO
Address: 15766 BENT CREEK ROAD
City-St-Zip: WELLINGTON, FL 33414

Title: D () Delete
Name: KURTZ, JOHN
Address: 1280 N. CONGRESS AVE. #107
City-St-Zip: WEST PALM BEACH, FL 33409

Title: D () Delete
Name: MOSS, JEFFREY
Address: 2452 STONEGATE DRIVE
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: JOHN KURTZ

PRES

02/04/2009

Electronic Signature of Signing Officer or Director

Date