

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010805

FILED
Apr 03, 2004
Secretary of State**Entity Name:** THE TREASURE COAST SENIOR SOFTBALL ASSOCIATION INC.**Current Principal Place of Business:**2822 SE FARLEY RD.
PORT ST. LUCIE, FL 34952**New Principal Place of Business:****Current Mailing Address:**2822 SE FARLEY RD.
PORT ST. LUCIE, FL 34952**New Mailing Address:****FEI Number:** 56-2440387**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MILLER, WILLIAM P
2822 SE FARLEY RD.
PORT ST. LUCIE, FL 34952**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: PD () Delete
Name: BOLZ, DICK
Address: 553 SW LUCERO DR.
City-St-Zip: PORT ST. LUCIE, FL 34983

Title: VD () Delete
Name: MALINOWSKI, THADDEUS
Address: 381 SE LANCASTER AVE.
City-St-Zip: PORT ST. LUCIE, FL 34984

Title: STD () Delete
Name: MILLER, WILLIAM P
Address: 2822 SE FARLEY RD.
City-St-Zip: PORT ST. LUCIE, FL 34952

Title: D () Delete
Name: FREKER, JOHN C
Address: 954 NW SPRUCE RIDGE DR.
City-St-Zip: STUART, FL 34994

Title: D () Delete
Name: O'CONNOR, GEORGE M
Address: 623 NW WHITFIELD WAY
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: D () Delete
Name: MCBEE, BUFORD E
Address: 2193 SE DOLPHIN RD.
City-St-Zip: PORT ST. LUCIE, FL 34952

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
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Title: () Change () Addition
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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 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 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: WILLIAM PHILLIP MILLER

TRES

04/03/2004

Electronic Signature of Signing Officer or Director

Date