

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000009519

FILED
Oct 23, 2006
Secretary of State

Entity Name: CROSSFIRE BASEBALL INC.

Current Principal Place of Business:

390 SW 66TH AVE.
MARGATE, FL 33068

New Principal Place of Business:

Current Mailing Address:

390 SW 66TH AVE.
MARGATE, FL 33068

New Mailing Address:

FEI Number: 37-1489192 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

POIRIER, MARK L SR.
390 SW 66TH AVE.
MARGATE, FL 33068 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: MARK LUKE POIRIER SR.

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: POIRIER, MARK L SR.
Address: 390 SW 66TH AVE.
City-St-Zip: MARGATE, FL 33068

Title: VP () Delete
Name: WOODBURN, JAMES R
Address: 2411 NW 68TH TERR.
City-St-Zip: MARGATE, FL 33063

Title: TREA () Delete
Name: WOODBURN, LISA
Address: 2411 NW 68TH TERR.
City-St-Zip: MARGATE, FL 33063

Title: SEC. () Delete
Name: POIRIER, KENDRA D
Address: 390 SW 66TH AVE.
City-St-Zip: MARGATE, FL 33068

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 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: MARK LUKE POIRIER SR.

P

10/23/2006

Electronic Signature of Signing Officer or Director

Date