

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000008018

FILED
Jan 16, 2009
Secretary of State

Entity Name: VENICE VIPERS SOFTBALL, INC.

Current Principal Place of Business:

828 MANGROVE RD.
VENICE, FL 34239

New Principal Place of Business:

Current Mailing Address:

828 MANGROVE RD.
VENICE, FL 34239

New Mailing Address:

FEI Number: 20-5337487

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BENEDICT, ROBERT C
1861 PLACIDA RD., SUITE 204
ENGLEWOOD, FL 342234949 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: PD () Delete
Name: CLIPSE, JERRY L
Address: 828 MANGROVE RD.
City-St-Zip: VENICE, FL 34293

Title: VD () Delete
Name: CLIPSE, DANA J
Address: 828 MANGROVE RD.
City-St-Zip: VENICE, FL 34293

Title: SD () Delete
Name: SIMES, JERRY G
Address: 6505 STARFISH AVENUE
City-St-Zip: NORTH PORT, FL 34286

Title: TD () Delete
Name: SMITH, KATIE H
Address: 991 SEA FOX RD.
City-St-Zip: VENICE, FL 34293

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: JERRY L CLIPSE

PD

01/16/2009

Electronic Signature of Signing Officer or Director

Date