

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000010069

FILED
Jun 28, 2007
Secretary of State

Entity Name: NEW TAMPA GIRL'S FASTPITCH, INC.

Current Principal Place of Business:

8202 GINGER PINE WAY
TAMPA, FL 33647

New Principal Place of Business:

Current Mailing Address:

8202 GINGER PINE WAY
TAMPA, FL 33647

New Mailing Address:

FEI Number: 20-5621533 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
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:

PAYNE, KELLY
8202 GINGER PINE WAY
TAMPA, FL 33647 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: PAYNE, ROBERT
Address: 8202 GINGER PINE WAY
City-St-Zip: TAMPA, FL 33647

Title: TD () Delete
Name: PAYNE, KELLY
Address: 8202 GINGER PINE WAY
City-St-Zip: TAMPA, FL 33647

Title: SD () Delete
Name: RUBINO, CAROLE
Address: 19023 WEATHERSTONE DR.
City-St-Zip: TAMPA, FL 33647

Title: D () Delete
Name: BARRETT, CRAIG
Address: 9631 FOX HEARST RD.
City-St-Zip: TAMPA, FL 33647

Title: VD () Delete
Name: PAYNE, DIANE
Address: 8202 GINGER PINE WAY
City-St-Zip: TAMPA, FL 33647

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: D (X) Change () Addition
Name: STOREY, DARLA
Address: 1806 E LINDA ST
City-St-Zip: PLANT CITY, FL 33563

Title: VD (X) Change () Addition
Name: MACZUGA, JACKIE
Address: 19103 ROSEWOOD CREEK WAY
City-St-Zip: TAMPA, FL 33647

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: KELLY R. PAYNE

TD

06/28/2007

Electronic Signature of Signing Officer or Director

Date