

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000004367

FILED
Apr 14, 2008
Secretary of State

Entity Name: STARZ FASTPITCH INC.

Current Principal Place of Business:

1474 RACHEL RD.
GRACEVILLE,, FL 32440 US

New Principal Place of Business:

Current Mailing Address:

1474 RACHEL RD.
GRACEVILLE,, FL 32440 US

New Mailing Address:

FEI Number: 20-8963181

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

DAVIS, GREGORY W
1474 RACHEL RD.
GRACEVILLE, FL 32440 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: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES () Change (X) Addition
Name: DAVIS, GREGORY W PRES.
Address: 1474 RACHEL RD.
City-St-Zip: GRACEVILLE, FL 32440 US

Title: V.P. () Change (X) Addition
Name: RABON, JOEY V.P.
Address: 2901 RABON LOOP
City-St-Zip: SNEADS, FL 32460 US

Title: SEC. () Change (X) Addition
Name: RABON, AMANDA SEC.
Address: 2901 RABON LOOP
City-St-Zip: SNEADS, FL 32460 FL

Title: TREA () Change (X) Addition
Name: BAXLEY, ANDY TREAS.
Address: 3939 HWY. 77
City-St-Zip: GRACEVILLE, FL 32440 US

Title: DIR. () Change (X) Addition
Name: PETERS, TONY DIR.
Address: 600 ODOM RD.
City-St-Zip: CHIPLEY, FL 32428 US

Title: DIR. () Change (X) Addition
Name: SOLGER, SANDI DIR.
Address: 1109 ORANGE HILL RD.
City-St-Zip: CHIPLEY, FL 32428 US

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: GREGORY W. DAVIS

PRES

04/14/2008

Electronic Signature of Signing Officer or Director

Date