

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N10000004174

**FILED**  
**Apr 10, 2012**  
**Secretary of State**

**Entity Name:** CITRUS PARK 50 PLUS SOFTBALL LEAGUE, INC.

**Current Principal Place of Business:**

25780 IMPATIENS CT.  
BONITA SPRINGS, FL 34135

**New Principal Place of Business:**

25804 BUTTERCUP CT  
BONITA SPRINGS, FL 34135 US

**Current Mailing Address:**

25780 IMPATIENS CT.  
BONITA SPRINGS, FL 34135

**New Mailing Address:**

25804 BUTTERCUP CT  
BONITA SPRINGS, FL 34135 US

**FEI Number:** 59-3571251

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BENAKOVICH, DENNIS  
25780 IMPATIENS CT.  
BONITA SPRINGS, FL 34135 US

**Name and Address of New Registered Agent:**

AMENT, STEVE R  
25804 BUTTERCUP CT  
BONITA SPRINGS, FL 34135 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: STEVE R AMENT

04/10/2012

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: AMENT, STEVE R  
Address: 25804 BUTTERCUP CT  
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: T  
Name: BIGRAS, JOHN  
Address: 25501 TROST BLVD #3-69  
City-St-Zip: BONITA SPRINGS, FL 34135 US

Title: PP  
Name: HUBER, DALE  
Address: 25936 FLOWERSTONE CT  
City-St-Zip: BONITA SPRINGS, FL 34135 US

I hereby 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 all other like empowered.

SIGNATURE: STEVE R AMENT

P

04/10/2012

Electronic Signature of Signing Officer or Director

Date