

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25751

FILED  
Jan 22, 2008  
Secretary of State

Entity Name: KEY WEST GIRLS SOFTBALL LEAGUE, INC.

**Current Principal Place of Business:**

3435 16TH TERR.  
KEY WEST, FL 33040 US

**New Principal Place of Business:**

**Current Mailing Address:**

3435 16TH TERR.  
KEY WEST, FL 33040 US

**New Mailing Address:**

FEI Number: 65-0051998

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

OSTERHOUDT, WILLIAM L JR.  
3435 16TH TERR  
KEY WEST, FL 33040 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: P ( ) Delete  
Name: OSTERHOUDT, WILLIAM L JR  
Address: 3435 16TH TERR.  
City-St-Zip: KEY WEST, FL 33040

Title: VP ( ) Delete  
Name: BAKER, BILL  
Address: 4 CYPRESS TERR.  
City-St-Zip: KEY WEST, FL 33040

Title: S ( ) Delete  
Name: SOLANO, JENIPHER  
Address: 6500 MALONEY AVE. #53  
City-St-Zip: KEY WEST, FL 33040

Title: T ( ) Delete  
Name: OSTERHOUDT, TAMMY  
Address: 3435 16TH TERR.  
City-St-Zip: KEY WEST, FL 33040

Title: PLAG ( ) Delete  
Name: WELLS, STEVE  
Address: 3621 NORTHSIDE COURT  
City-St-Zip: KEY WEST, FL 33040

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: VP (X) Change ( ) Addition  
Name: SANTIAGO, JOSE  
Address: 3306 EAGLE AVENUE  
City-St-Zip: KEY WEST, FL 33040

Title: S (X) Change ( ) Addition  
Name: AMY, WARDLOW  
Address: 3806 CINDY AVENUE  
City-St-Zip: KEY WEST, FL 33040

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PLAG (X) Change ( ) Addition  
Name: MARSDEN, GARY  
Address: 17277 ALLAMANDA DRIVE  
City-St-Zip: SUGARLOAF, FL 33047

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: WILLIAM L OSTERHOUDT

PRES

01/22/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date