

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25751

FILED  
Feb 05, 2009  
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: SANTIAGO, JOSE  
Address: 3306 EAGLE AVENUE  
City-St-Zip: KEY WEST, FL 33040

Title: S ( ) Delete  
Name: AMY, WARDLOW  
Address: 3806 CINDY AVENUE  
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: MARSDEN, GARY  
Address: 17277 ALLAMANDA DRIVE  
City-St-Zip: SUGARLOAF, FL 33047

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

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

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

Title: S (X) Change ( ) Addition  
Name: WOOD, HOLLIS  
Address: 31332 AVENUE J  
City-St-Zip: BIG PINE KEY, FL 33043

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: WILLIAM L OSTERHOUDT, JR

P

02/05/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date