2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N31928

FILED Apr 17, 2009 Secretary of State

Entity Name: DEERFIELD BEACH OVER 50 SOFTBALL CLUB, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	R PARK % ATHL	ETICS			
	2ND AVENUE ELD BEACH, FL	33441			
Current N	Mailing Addres	s:	New Mailing Addre	ss:	
	R PARK % ATHL	ETICS			
	2ND AVENUE ELD BEACH, FL	33441			
El Numbe	er: 65-0105543	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
3031 LYN	TE, PAUL IDHURST-J ELD BEACH, FL	33442 US			
	e named entity s te of Florida.	submits this statement for the pu	urpose of changing its register	ed office or registered agent, or both,	
SIGNATU	JRE:				
	Electron	ic Signature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
	S ()	Delete	Title:	() Change () Addition	
Fitle: Name: Nddress: City-St-Zip:	SURRETTE, PA 3031 LYNDHUR		Name: Address: City-St-Zip:		
Name: Address: City-St-Zip: Fitle: Name: Address:	SURRETTE, PA 3031 LYNDHUR DEERFIELD BE T () GENDREAU, RO 1356 SE 7TH C	RST-J EACH, FL 33442 Delete DNALD OURT	Address:	() Change () Addition	
Name: Nddress:	SURRETTE, PA 3031 LYNDHUR DEERFIELD BE T () GENDREAU, RG 1356 SE 7TH C DEERFIELD BG SD () BROOKER, WII 19592 COLORA	RST-J EACH, FL 33442 Delete ONALD OURT CH, FL 33441 Delete LLIAM ADO CIR	Address: City-St-Zip: Title: Name: Address:		
Name: Address: Dity-St-Zip: Fitle: Name: Address: Dity-St-Zip: Fitle: Name: Address:	SURRETTE, PA 3031 LYNDHUF DEERFIELD BE T () GENDREAU, RO 1356 SE 7TH C DEERFIELD BO SD () BROOKER, WII 19592 COLORA BOCA RATON, D () HALPER, AL 22135 COCOA	RST-J EACH, FL 33442 Delete DNALD OURT CH, FL 33441 Delete LLIAM ADO CIR FL 33434 Delete PALM WAY	Address: City-St-Zip: Title: Name: Address: City-St-Zip: Title: Name: Address:	()Change ()Addition	

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 BROOKER SD 04/17/2009