## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

## DOCUMENT # N44351

1. Entity Name

TAMPA HEATWAVE GIRLS FASTPITCH SOFTBALL ASSOCIATION CORPORATION



FILED Jan 18, 2005 08:00 AM Secretary of State

Principal Place of Business

34031 ESTATES LANE ZEPHYRHILLS, FL 33543 Mailing Address

34031 ESTATES LANE ZEPHYRHILLS, FL 33544



01132005 No Chg-NP

CR2E037 (10/03)

4. FEI Number 05-0534492 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

LEBLANC, SONNY 34031 ESTATES LANE ZEPHYRHILLS, FL 33543

## DO NOT WRITE IN THIS SPACE

SIGNATURE.	Signature, typed or printed name of registered agent and title i	applicable. (NOTE: Registered Agen	signatur	a required when reinstating)	DATE	
	Filing Fee is \$61.25 Due by May 1, 2005	<ol> <li>Election Campaign Financing Trust Fund Contribution.</li> </ol>		\$5.00 May Be Added to Fees		
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREEN, SHANON 14294 SE 42ND AVE WEBSTER, FL 33597					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD FOWLER, KIMBERLEE 19314 SANDY SPRINGS CIRCLE LUTZ, FL 33549				Unnon181880 01/19/05-80006-002 61.25	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD WILLIAMS, SANDY 4307 N WILDER ROAD PLANT CITY, FL 33565		_	DO	NOT WRITE THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WILLIAMS, EARL 4307 N WILDER RD PLANT CITY, FL 33565			IN '		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, BOB 2904 FORREST CLUB DR PLANT CITY, FL 33567					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	certify that the information supplied with this fili					

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPEQ OR PRINTED NAME OF SIGNATURE OF FICER ON DIRECTOR

1/13/05 813-681-5579