

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED
Dec 07, 2009
Secretary of State**

DOCUMENT# N49788

Entity Name: PEMBROKE PINES GIRLS SOFTBALL, INC.

Current Principal Place of Business:FLETCHER PARK
7900 JOHNSON ST
PEMBROKE PINES, FL 33024 US**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 84-9196
PEMBROKE PINES, FL 33084 US**New Mailing Address:**

FEI Number: 65-0351183

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:WALT, LISA
13535 SW 113 CT
MIAMI, FL 33176 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: DP () Delete
Name: CASSIDY, JANE
Address: 1200 NW 91 AVE
City-St-Zip: PEMBROKE PINES, FL 33024Title: D/TR () Delete
Name: PALMACCI, MEGAN
Address: 6641 SW 9 STREET
City-St-Zip: PEMBROKE PINES, FL 33023Title: DVP () Delete
Name: WALT, LISA
Address: 13535 SW 113 CT
City-St-Zip: MIAMI, FL 33176Title: () Delete
Name:
Address:
City-St-Zip:**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: SD () Change (X) Addition
Name: ALBERT, LORI
Address: 8840 NW 13 STREET
City-St-Zip: PEMBROKE PINES, FL 33023

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: JANE CASSIDY

DP

12/07/2009

Electronic Signature of Signing Officer or Director

Date