

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N92000000693

FILED
May 11, 2004
Secretary of State**Entity Name:** BLAZERS SOFTBALL TEAM, INC.**Current Principal Place of Business:**72 SHADOWCREEK WAY
ORMOND BEACH, FL 32174 US**New Principal Place of Business:****Current Mailing Address:**72 SHADOWCREEK WAY
ORMOND BEACH, FL 32174 US**New Mailing Address:****FEI Number:** 59-3177526**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**JOHNSON, DOUGLAS E
72 SHADOWCREEK WAY
ORMOND BCH, FL 32127**Name and Address of New Registered Agent:**JOHNSON, DOUGLAS E
72 SHADOWCREEK WAY
ORMOND BCH, FL 32174 US

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: _____

05/11/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** DVP () Delete
Name: WILES, JACK
Address: 6248 PALOMINO CIRCLE
City-St-Zip: PT ORANGE, FL 32127**Title:** DP () Delete
Name: JOHNSON, DOUGLAS E
Address: 72 SHADOWCREEK WAY
City-St-Zip: ORMOND BCH, FL 32174**Title:** D () Delete
Name: LANDAU, IRWIN
Address: 1450 W. GRANADA BLVD, SUITE 1
City-St-Zip: ORMOND BEACH, FL**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** D (X) Change () Addition
Name: LANDAU, IRWIN
Address: 1450 W. GRANADA BLVD, SUITE 1
City-St-Zip: ORMOND BEACH, FL 32174

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DOUGLAS JOHNSON

DP

05/11/2004

Electronic Signature of Signing Officer or Director

Date