


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90732 049 ****61.25

DOCUMENT # N94000000480 1. Entity Name GIRLS SOFTBALL ASSOCIATION OF COLUMBIA COUNTY, INC.			
Principal Place of Business 510 SE BAYA DR, STE 103 LAKE CITY, FL 32025		Mailing Address P.O. BOX 2225 LAKE CITY, FL 32056 US	
2. Principal Place of Business 846 SW MAIN Blvd Suite, Apt. #, etc.		3. Mailing Address 846 SW MAIN Blvd Suite, Apt. #, etc.	
City & State Lake City FL Zip 32025		City & State Lake City FL Zip 32025	
4. FEI Number 59-3217578		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PARKER, RICHARD E 510 SE BAYA DR, STE 103 LAKE CITY, FL 32025		7. Name and Address of New Registered Agent Name JACQUELINE SUND Street Address (P.O. Box Number is Not Acceptable) 1054 SW LAKE MONTGOMERY Ave City LAKE CITY FL Zip Code 32025	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Jacqueline Sund</u> DATE <u>4/29/04</u> <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State.			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARKER, RICHARD E RT 15 BOX 3804 LAKE CITY, FL 32024 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/TREAS JACQUELINE SUND 1054 SW LAKE MONTGOMERY Ave LAKE CITY FL 32025 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DRAKE, RONALD RT 12 BOX 142 LAKE CITY, FL 32025 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/PRES MARK BONS 601 NW Bronco Terrace LAKE CITY FL 32055 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MASTERS, CINDEE RT 11 BOX 790 LAKE CITY, FL 32024 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/Vice Pres. Jimmy Williams PO Box 432 LAKE CITY, FL 32056 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BLAIR, CYNTHIA R RT 12 BOX 132 LAKE CITY, FL 32025 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D/Sec. Karen Collins 321 SW Emerald St. LAKE CITY, FL 32024 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: <u>Jacqueline Sund</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date <u>4-29-04</u> Daytime Phone # <u>386-752-4576</u>	