

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000480

FILED  
Apr 30, 2011  
Secretary of State

**Entity Name:** GIRLS SOFTBALL ASSOCIATION OF COLUMBIA COUNTY, INC.

**Current Principal Place of Business:**

1963 SW BASCOM NORRIS DR.  
LAKE CITY, FL 32025

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2225  
LAKE CITY, FL 32056 US

**New Mailing Address:**

**FEI Number:** 59-3217578

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

KENNON, GREG  
141 NW HORIZON ST  
LAKE CITY, FL 32055 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: P  
Name: KENNON, GREG  
Address: 141 NW HORIZON ST  
City-St-Zip: LAKE CITY, FL 32055

Title: V  
Name: COLLINS, TAMMY  
Address: 296 S.W. LONGLEAF DRIVE  
City-St-Zip: LAKE CITY, FL 32024

Title: T  
Name: CARTER, CARRIE  
Address: 251 SW COVEY CT  
City-St-Zip: LAKE CITY, FL 32025

Title: S  
Name: PADGETT, MICHELLE  
Address: SW PINEMOUNT RD.  
City-St-Zip: LAKE CITY, FL 32024

Title: D  
Name: CREWS, AMBER  
Address: 264 SW COURTESY WAY  
City-St-Zip: LAKE CITY, FL 32024

Title: D  
Name: LEE, CHARLES  
Address: 215 NW CONCORD CT  
City-St-Zip: LAKE CITY, FL 32055

I hereby 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 all other like empowered.

SIGNATURE: GREG KENNON

P

04/30/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date