

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005710

FILED
Feb 18, 2007
Secretary of State

Entity Name: YOUTH SOFTBALL ASSOCIATION OF CORAL SPRINGS, INC.

Current Principal Place of Business:

P.O. BOX 9192
CORAL SPRINGS, FL 33075

New Principal Place of Business:

10301 WILES ROAD
CORAL SPRINGS, FL 33076

Current Mailing Address:

P.O. BOX 9192
CORAL SPRINGS, FL 33065

New Mailing Address:

P.O. BOX 9192
CORAL SPRINGS, FL 33075

FEI Number: 65-0534981

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GREEN, SUSAN D
11560 NW 56TH DRIVE
115
CORAL SPRINGS, FL 33076 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: PSZYK, MICHAEL III
Address: 5024 NW 106TH WAY
City-St-Zip: CORAL SPRINGS, FL 33076

Title: DV () Delete
Name: CARMODY, RAY
Address: 8500 NW 43RD COURT
City-St-Zip: CORAL SPRINGS, FL 33067

Title: DS () Delete
Name: FAIRCHILD, ANDREW
Address: 10648 NW 49 COURT
City-St-Zip: CORAL SPRINGS, FL 33076

Title: DVVP () Delete
Name: CARAVALLA, DOMINICK
Address: 8214 NW 41ST STREET
City-St-Zip: CORAL SPRINGS, FL 33065

Title: DT () Delete
Name: GREEN, SUSAN D
Address: 11560 NW 56TH DRIVE #115
City-St-Zip: CORAL SPRINGS, FL 33076

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: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: SUSAN GREEN

DT

02/18/2007

Electronic Signature of Signing Officer or Director

Date