FILE NOW: FILING FEE IS \$61.25 NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State 1996 DIVISION OF CORPORATIONS DOCUMENT # N 9500 0000 433 ORIANDO EXPRESS SOFTBALL INC 1130 PALAdin CT 3. Date Incorporated or Qualified 32812 3a. Date of Last Report 2a. Mailing Address 21 Applied For 26 Not Applicable Suite. Ant # etc. Suite, Apt. #, etc \$8.75 Additional 22 5. Certificate of Status Desired 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes Avo 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) 82 83 City Crando 84 85 Zip Code 11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 617.0503. Florida Statutes. 32812 William Ox gistered agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 11 TITLE 2 Addition NAME Greg Pingston 1.2 NAME William L Ford STREET ADDRESS 1130 Paladin Ct 1360 Hempstrad Trail Oviedo, Pr 3276 1.3 STREET ADDRESS CITY-ST-ZIP 33765 14 CITY-ST-ZIP Orbado, PL TITLE DELFTE 21 TITLE Cindy Noble 3266 Kew bardens Lane Change Addition NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS ORIANDO FL 32812 CITY-ST-ZIP 2 4 CITY - ST- ZIP TITLE DELETE 3.1 TITLE Change Addition NAME Teresa O. Sowards 3159 Tourning Ave ary Thayer Dr 3 2 NAME STREET ADORESS 26 N. 3 3 STREET ADDRESS CITY-ST-ZIP <u>Orlando</u> FL 33812 Oelando FL 32807 3 4. CITY - ST - 7/P TITLE DELETE 4.1 TITLE Change Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZIP 4.4 CITY - ST - ZIP TITLE DELETE 5.1 TITLE 800001820978°° -05/14/96--01113--**00**0 *0/3* Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS \*\*\*81.25 CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6 1 TITLE Change **Y**ddition NAME 5.2 NAME STREET ADDRESS w 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as in made under eath; 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 12 or Block 13 if changed, or on an attachment with an address.