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Mar 17 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N95000001276 (3)

1. Corporation Name

NORTH PALM BEACH GIRL'S SOFTBALL ASSOCIATION, IN  
C.

Principal Place of Business

11380 PROSPERITY FARMS ROAD  
SUITE 204  
PALM BEACH GARDENS FL 33410

Mailing Address

11380 PROSPERITY FARMS ROAD  
SUITE 204  
PALM BEACH GARDENS FL 33410-3496



3. Date Incorporated or Qualified  
03/16/1995

3a. Date of Last Report  
02/15/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

2a. Mailing Address

25 Suite, Apt. #, etc.

26 City & State

27 Zip

Country

28

29

30

4. FEI Number  
65-0534815

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MEROLA, JAMES R  
11380 PROSPERITY FARMS ROAD  
SUITE 204  
PALM BEACH GARDENS FL 33410

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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 office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D/P ☐ DELETE  
NAME VALENTE, THOMAS  
STREET ADDRESS 659 KINGFISH PLACE  
CITY-ST-ZIP NORTH PALM BEACH FL

TITLE D ☐ DELETE  
NAME PATERSEN, LISA  
STREET ADDRESS 1577 PACKWOOD ROAD  
CITY-ST-ZIP NORTH PALM BEACH FL

TITLE D / 7 ☐ DELETE  
NAME ARSENAULT, GERARD  
STREET ADDRESS 1161 EMERALD DRIVE  
CITY-ST-ZIP SINGER ISLE FL

TITLE D ☒ DELETE  
NAME PUYOL, ORLANDO  
STREET ADDRESS 616 LIGHTHOUSE DRIVE  
CITY-ST-ZIP NORTH PALM BEACH FL 33408

TITLE D ☐ DELETE  
NAME SMITH, DAVID  
STREET ADDRESS 518 MARLIN ROAD  
CITY-ST-ZIP NORTH PALM BEACH FL

TITLE D / Vice President ☐ DELETE  
NAME WALKER, REBECCA  
STREET ADDRESS 807 EASTERLY ROAD  
CITY-ST-ZIP NORTH PALM BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition  
3.2 NAME Arsenault  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13, unchanged, or on an attachment with an address.

CR2E037 (9/96)