## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # N9500002304 (2)

## MERRITT ISLAND LASSIE LEAGUE SOFTBALL, INC.

Principal Place of Business	Mailing Address		C tedatibli Bio Loral Still Self Self Bill Bell Bill	a libus stift abite Giffi (St.
96 WILLARD STREET SUITE 302 COCOA FL 32922	96 WILLARD STREET SUITE 302 COCOA FL 32922		3. Date Incorporated or Qualified 05/11/1995	
OOOOA 12 SEVEE	OOON TE DESEE		4. FEI Number	Applied For
			59-1717892	Not Applicable
2. Principal Place of Business	2a. Mailing Address 26		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Suite, Apt. #, etc.  Suite, Apt. #, etc.  27			Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
City & State         City & State           23         28			7. Is this nonprofit corporation a homeowners association?	
Zip Country 25	Zip Country 29 30		8. This corporation owes or has paid the curre Personal Property Tax due June 30.	ent year Intangible Yes 🛣 No
Name and Address of Current Registered Agent			10. Name and Address of New Registered A	gent
		81 Name		
AMARI, RICHARD S 96 WILLARD STREET		82 Street Addre	2 Street Address (P.O. Box Number Is Not Acceptable)	
SUITE 302 COCOA FL 32922		83		
0000A1E 02322		84 City	FL	85 Zip Code
<ol> <li>Pursuant to the provisions of Sections 617.05 office or registered agent, or both, in the State agent. I am familiar with, and accept the oblig</li> </ol>	e of Florida. Such change was authorize	ed by the corporation	oration submits this statement for the purpose of con's board of directors. I hereby accept the appoint	changing its registered introent as registered
SIGNATURE				<u> </u>

agent. I a	m familiar with, and accept the obligations o	f, Section 617.0503, Flo	rida Statutes.	poration a board of directors. Thereby accept the appointment as registered		
SIGNATURE			<u> </u>			
Signature, typed or printed name of registered agent and title if applicable. (NOTE: F  12. OFFICERS AND DIRECTORS			Registered Agent signature	egistered Agent signature required when reinstating)  DATE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	DELETE	1.1 TITLE	Change Addition		
NAME	AMARI. RICHARD S	<del>_</del>	1.2 NAME			
STREET ADDRESS	1015 OLD PARSONAGE ROAD		1.3 STREET ADDRESS			
CITY-ST-ZIP	MERRITT ISLAND FL 32952		1.4 C/TY-ST-ZIP			
TITLE	D	DELETE	2.1 TITLE	Change Addition		
NAME	GIBSON, JEFF		2.2 NAME			
STREET ADDRESS	85 SOUTH ATLANTIC, #306		2.3 STREET ADDRESS	2325 MARSH HALBOR AVE		
CITY-ST-ZIP	COCOA BEACH FL 32931		2. 4 CITY - ST - ZIP	2325 MARSH HARBOR AVE MERRITY ISLAND, 192 32952		
TITLE	D	☐ DELETÉ	3.1 TITLE	Change Addition		
NAME	HOFFMAN, GARY		3.2 NAME			
STREET ADDRESS	2170 COCONUT LANE		3,3 STREET ADDRESS			
CITY-ST-ZIP	MERRITT ISLAND FL		3.4. CITY - ST - ZIP			
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		DELETÉ	5.1 TITLE	Change Addition		
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE	Change Addition		
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
_			■			

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.D7(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 receivement rustee 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 alternment with an address.

SIGNATURE: ALL TIS RESERVED CARSON 0/10/98 (407)632.488

CR2E037 (10/97)

**FILED** 

Feb 04 1998 8:00am

Secretary of State