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Apr 30 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 # N95000004525 (0)

1. Corporation Name

FLAGLER FASTPITCH ATHLETIC SOFTBALL TEAMS, INC.



Principal Place of Business

Mailing Address

5 OLD KINGS ROAD N  
PALM COAST FL 32137

P.O. BOX 353357  
PALM COAST FL 32135-3357

3. Date Incorporated or Qualified  
09/21/1995

3a. Date of Last Report  
09/11/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number  
59-3375120

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

WALKER, DONALD L  
15 OLD KINGS ROAD NORTH  
PALM COAST FL 32137

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 *Donald L Walker*  
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE  
NAME DOSS, TED  
STREET ADDRESS 1828 SOUTH DAYTONA AVE  
CITY - ST - ZIP FLAGLER BEACH FL 32138

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

TITLE V ☐ DELETE  
NAME WALKER, DONALD L  
STREET ADDRESS 29 BANTON LANE  
CITY - ST - ZIP PALM COAST FL 32137

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

TITLE T ☐ DELETE  
NAME DICKINSON, CINDY  
STREET ADDRESS 9 WHITTINGHAM LANE  
CITY - ST - ZIP PALM COAST FL 32184

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

TITLE S ☐ DELETE  
NAME CUFF, TONI  
STREET ADDRESS 142 BREN MAR LANE  
CITY - ST - ZIP PALM COAST FL 32137

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

TITLE D ☐ DELETE  
NAME BURNS, LAWRENCE  
STREET ADDRESS 6 CORNING COURT  
CITY - ST - ZIP PALM COAST FL 32137

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

TITLE D ☐ DELETE  
NAME BURNS, HELENE  
STREET ADDRESS 6 CORNING COURT  
CITY - ST - ZIP PALM COAST FL 32137

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 if changed, or on any Attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Ordinary Power Attorney

CR2E037 (9/96)

*Cindy Dickinson* 4/3/97 904-446-6339