

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005370

FILED
Jul 12, 2006
Secretary of State

Entity Name: MISS VENICE FASTPITCH, INC.

Current Principal Place of Business:

1000 WELL FIELD DR
VENICE, FL 34292 US

New Principal Place of Business:

1300 RIDGEWOOD DRIVE
VENICE, FL 34292 US

Current Mailing Address:

PO BOX 1643
VENICE, FL 34284

New Mailing Address:

FEI Number: 65-0760741 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ELLINGSEN, RALPH
987 TAMPA RD
VENICE, FL 34293 US

Name and Address of New Registered Agent:

DEMING, MICHAEL
951 TROTTER STREET
NOKOMIS, FL 34275 US

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: MICHAEL DEMING

07/12/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ELLINGSEN, RALPH
Address: 987 TAMPA RD.
City-St-Zip: VENICE, FL 34293

Title: S () Delete
Name: QUINN, ANGELA
Address: 1000 WELL FIELD DR
City-St-Zip: VENICE, FL 34292

Title: V () Delete
Name: MARKUSSON, DAN
Address: 531 FOXGLOVE RD
City-St-Zip: VENICE, FL 34293

Title: T () Delete
Name: WAGGONER, TODD
Address: 558 CAPISTRANO DR
City-St-Zip: NOKOMIS, FL 34285

Title: T (X) Delete
Name: MCCUTCHEON, DAVE
Address: 1104 SORRENTO WOODS BLVD
City-St-Zip: NOKOMIS, FL 34285

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: DEMING, MICHAEL
Address: 951 TROTTER STREET
City-St-Zip: NOKOMIS, FL 34275

Title: V (X) Change () Addition
Name: QUINN, ANGELA
Address: 444 AVALON ROAD
City-St-Zip: VENICE, FL 34293

Title: S (X) Change () Addition
Name: MARKUSSON, DAN
Address: 531 FOXGLOVE ROAD
City-St-Zip: VENICE, FL 34293

Title: T (X) Change () Addition
Name: MCCUTCHEON, DAVE
Address: 1104 SORRENTO WOODS BLVD.
City-St-Zip: NOKOMIS, FL 34275

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: MICHAEL DEMING

P

07/12/2006

Electronic Signature of Signing Officer or Director

Date