

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000005370

FILED  
Jun 13, 2007  
Secretary of State

Entity Name: MISS VENICE FASTPITCH, INC.

## Current Principal Place of Business:

1300 RIDGEWOOD DRIVE  
VENICE, FL 34292 US

## New Principal Place of Business:

## 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:

DEMING, MICHAEL  
951 TROTTER STREET  
NOKOMIS, FL 34275 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

## OFFICERS AND DIRECTORS:

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

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

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

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

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: V (X) Change ( ) Addition  
Name: ROSA, ANTHONY  
Address: 523 BAYSIDE WAY  
City-St-Zip: NOKOMIS, FL 34275

Title: S (X) Change ( ) Addition  
Name: SIMES, KIM  
Address: 6505 STARFISH AVENUE  
City-St-Zip: NORTH PORT, FL 34286

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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

06/13/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date