## **2003 NOT-FOR-PROFIT CORPORATION** UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # N95000005719

## ORI ANDO HEAT GIRLS EASTPITCH SOFTBALL INC.



## **FILED** May 21, 2003 8:00 am Secretary of State 05-21-2003 90188 003 \*\*\*\*61.25

OHEANDO	TIERT G			LL MO			7				
Principal Place of Business				ng Address							
4562 WHEELHOUSE CT. ORLANDO FL 32812				WHEELHOUSE CT. NDO FL 32812							
2. Principal Place of Business				iling Address				<b>eeiti 3</b> 1,111 (000, 11)	{ <b>                       </b>		
Suite, Apt. #, etc.				uite, Apt. #, etc.		CHECK HERE IF MAKING CHANGES					
City & State				ity & State	4. FEI Number	4. FEI Number 59-3354280 Applied For Not Applicable					
Zip Country		Zip		Cou	untry	5. Certificate of S	Status Desired		\$8.75 Add	ditional	
6 Name and Address of Currer		t Bagistarad Agant				7. Name and Address of New Registered Agent					
6. Name and Address of Current Registered Agent						Name	r. Manio and ra	4,000	riogioiore		
STRAZI, TOMMY						Street Address (P.O. Box Number is Not Acceptable)					
	eelhouse ) Fl 32812										
0110012012						City			F	Zip Code	e
R The above	named entit	y submits this statement f	or the pur	nose of changing its	regieter	ed office or regis	stered agent, or both, in	n the State of F		_	and accept
	ions of regist		or trie pur	oose of changing its	register	ed office of regis	stered agent, or both, h	THE STATE OF	ionaa. Ta	THE TANK THE	and addept
SIGNATURE .	Signature, typed	or printed name of registered ager	t and title if ap	plicable. (NOT	E: Registere	ed Agent signature requ	uired when reinstating)	——————————————————————————————————————	DATE		<u> </u>
FILE NOW: FEE IS \$61.25				9. Election Campaign Financing Trust Fund Contribution.			<b>\$5.00</b> May Be Added to Fees			ck Payable artment of S	
10.		OFFICERS AND D	IRECTORS	<u>                                     </u>	11.		ADDITIONS/CHANG	GES TO OFFIC	ERS AND	DIRECTORS IN	110
TITLE	D	•		☐ Delete	TITL	E				☐ Change	☐ Addition
NAME	STRAZI, T				NAM	ME EET ADDRESS					
STREET ADDRESS CITY-ST-ZIP		ELHOUSE CT. FL 32812				Y-ST-ZIP					
TITLE	D	FL 32012		☐ Delete	TITL	E				☐ Change	Addition
NAME	STRAZI, G	INGER C			NAM	AE					
STREET ADDRESS		ELHOUSE CT				EET ADDRESS					
CITY-ST-ZIP	1_	FL 32812	,	<u> </u>	_	r-St-ZiP				Change	Addition
~TITLE ➤ - >= -= NAME	RODAK, T			Delete	_TITL NAM	l l			. ~.	Change	Addition
STREET ADDRESS		HTMANS CT.			STRE	EET ADDRESS					
CITY-ST-ZIP	ORLANDO	FL 32812			CITY	/-ST-ZIP					
TITLE	D	v		☐ Delete	TITL					Change	Addition
NAME STREET ADDRESS	PATTI, RA	Y WATER POINTE DRIVI	=		NAM	NE EET ADORESS					
CITY-ST-ZIP		FL 32812	-			/-ST-ZIP					
TITLE				☐ Delete	TITL	.E				Change	☐ Addition
NAME					NAM	AE .					1
STREET ADDRESS						EET ADDRESS					
CITY-ST-ZIP					-	/-ST-ZIP					□ Addition
TITLE NAME				☐ Delete	TITL NAM					Change	☐ Addition
STREET ADDRESS						EET ADDRESS					
CITY-ST-ZIP					CITY	r-St-ZIP					
12. I hereby	ertify that th	e information supplied wit	th this filing	g does not qualify for	r the exe	emption stated in	Section 119.07(3)(i), F	lorida Statutes	s. I further o	certify that the in	nformation

indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other just a provided that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other just a provided that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other just a provided that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other just a provided that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address.

SIGNATURE: