

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000000750

FILED
May 09, 2008
Secretary of State

Entity Name: CALOOSA PARK SOFTBALL CLUB, INC.

Current Principal Place of Business:

1123 RIALTO DR
BOYNTON BEACH, FL 33436

New Principal Place of Business:

Current Mailing Address:

P O BOX 1481
BOYNTON BEACH, FL 33425

New Mailing Address:

FEI Number: 65-0648485 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:

BELL, TONY
1123 RIALTO DR
BOYNTON BEACH, FL 33436 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: BELL, TONY
Address: 1123 RIALTO DRIVE
City-St-Zip: BOYNTON BEACH, FL 33436

Title: V () Delete
Name: GRANT, CHRISTOPHER
Address: 1201 SW 25TH PL.
City-St-Zip: BOYNTON BEACH, FL 33426

Title: ST () Delete
Name: DRISCOLL, KIMBERLY A
Address: 324 SPRUCE ST.
City-St-Zip: BOYNTON BEACH, FL 33426

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: DRISCOLL, KIMBERLY A
Address: 324 SPRUCE ST.
City-St-Zip: BOYNTON BEACH, FL 33426

Title: D () Change (X) Addition
Name: BURN, CHARLES B
Address: 324 SPRUCE ST
City-St-Zip: BOYNTON BEACH, FL 33426

Title: D () Change (X) Addition
Name: HUBER, CATHERINE A
Address: 28 VALENCIA DR
City-St-Zip: BOYNTON BEACH, FL 33436

Title: D () Change (X) Addition
Name: PLAKSTIS, LORRAINE E
Address: 6904 BIG PINE KEY ST
City-St-Zip: LAKE WORTH, FL 33467

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: KIMBERLY A DRISCOLL

S

05/09/2008

Electronic Signature of Signing Officer or Director

Date