FILE NOW: FILING FEE IS $61.25 1st year

NONPROFIT CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 06 1998 8:00am
Secretary of State

DOCUMENT # N97000000220 (0)

1. Corporation Name

TWILIGHT GIRLS FAST PITCH SOFTBALL, INC.

Principal Place of Business	Mailing Address
146 LAKE DAISY TERRACE WINTER HAVEN FL 33884	146 LAKE DAISY TERRACE WINTER HAVEN FL 33884

3. Date Incorporated or Qualified: 01/15/1997

4. FEI Number: 59-3358837 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business 21 / Suite, Apt. #, etc. 22 / City & State 23 / Zip 24 / Country 25

2a. Mailing Address 26 / Suite, Apt. #, etc. 27 / City & State 28 / Zip 29 / Country 30

5. Certificate of Status Desired ☒ $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

SIMOENS, JAMES L
146 LAKE DAISY TERRACE
WINTER HAVEN FL 33884

10. Name and Address of New Registered Agent

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 ______ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	~~PRESIDENT~~	☐ DELETE
NAME	~~JIM SIMOENS~~	
STREET ADDRESS	~~146 LAKE DAISY TERR~~	
CITY-ST-ZIP	~~WINTER HAVEN FL 33884~~	
TITLE	~~SECRETARY~~	☐ DELETE
NAME	~~DONALD DAILEY~~	
STREET ADDRESS	~~170 LAKE DAISY TERR~~	
CITY-ST-ZIP	~~WINTER HAVEN FL 33884~~	
TITLE	~~TREASURER~~	☐ DELETE
NAME	~~DONALD STRATTON~~	
STREET ADDRESS	~~640 PINECREST DR~~	
CITY-ST-ZIP	~~BARTOW FL 33830~~	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 1st year ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D	PRESIDENT	☐ Change ☒ Addition
1.2 NAME	JIM SIMOENS	
1.3 STREET ADDRESS	146 LAKE DAISY TERR	
1.4 CITY-ST-ZIP	WINTER HAVEN FL 33884	
2.1 TITLE D	SECRETARY	☐ Change ☒ Addition
2.2 NAME	DONALD DAILEY	
2.3 STREET ADDRESS	170 LAKE DAISY TERR	
2.4 CITY-ST-ZIP	WINTER HAVEN FL 33884	
3.1 TITLE D	TREASURER	☐ Change ☒ Addition
3.2 NAME	DONALD STRATTON	
3.3 STREET ADDRESS	640 PINECREST DR	
3.4 CITY-ST-ZIP	BARTOW FL 33830	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I 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 an attachment with an address.

SIGNATURE: James L Simoens JAMES L SIMOENS PRESIDENT, Twilight 1/6/98 941-676-7878

SIGNATURE REQUIRED — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (10/97) 0056939