2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000853

Entity Name: LADY LIONS SOFTBALL, INC.

FILED Jul 22, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O LEON HIGH SCHOOL 550 EAST TENNESSEE STREET TALLAHASSEE, FL 32308

Current Mailing Address: New Mailing Address:

C/O LEON HIGH SCHOOL 550 EAST TENNESSEE STREET TALLAHASSEE, FL 32308

FEI Number: 16-1631537 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: Name and Address of New Registered Agent:

WALSH, ROBERT P GOFF, WILLIAM C
590 MEADOW RIDGE DRIVE 2411 FORMOSA DRIVE
TALLAHASSEE, FL 32312 US TALLAHASSEE, FL 32308 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: WILLIAM C. GOFF 07/22/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: () Change () Addition Name: GOFF, WILLIAM C Name:

 Name:
 GOFF, WILLIAM C
 Name:

 Address:
 2411 FORMOSA DRIVE
 Address:

 City-St-Zip:
 TALLAHASSEE, FL 32308
 City-St-Zip:

Title: VD () Delete Title: VD (X) Change () Addition

Name: SMITH, ALISA J Name: MILLA, JOHN

Address: 3310 JOHN HANCOCK DRIVE Address: 1531 OLDFIELD DRIVE City-St-Zip: TALLAHASSEE, FL 32302 City-St-Zip: TALLAHASSEE, FL 32308

Title: S () Delete Title: T (X) Change () Addition

 Name:
 SAVAGE, MICHAEL E
 Name:
 SAVAGE, MICHAEL E

 Address:
 3429 CASTLEBAR CIRCLE
 Address:
 3429 CASTLEBAR CIRCLE

 City-St-Zip:
 TALLAHASSEE, FL 32309
 City-St-Zip:
 TALLAHASSEE, FL 32309

Title: TD () Delete Title: S (X) Change () Addition

Name: WALSH, ROBERT P Name: HARTSFIELD, GINA
Address: 590 MEADOW RIDGE DRIVE Address: 474 BARINEAU ROAD
City-St-Zip: TALLAHASSEE, FL 32312 City-St-Zip: TALLAHASSEE, FL 32304

Title: D () Delete Title: D (X) Change () Addition

Name: JONES, WINDY Name: SABOURIN, THOMAS

Address: 550 EAST TENNESSEE STREET Address: 550 EAST TENNESSEE STREET
City-St-Zip: TALLAHASSEE, FL 32308

Address: 550 EAST TENNESSEE STREET
City-St-Zip: TALLAHASSEE, FL 32308

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: WILLIAM C. GOFF P 07/22/2008