

FILE NOW: FILING FEE IS \$61.25

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Jul 02 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N97000001267 (0)**

1. Corporation Name

SEBRING YOUTH FAST PITCH SOFTBALL, INC.



Principal Place of Business	Mailing Address
1229 NAHAW AVENUE SEBRING FL	1229 NAHAW AVENUE SEBRING FL

2. Principal Place of Business	2a. Mailing Address
21 127 Sharon ave.	26 P.O. Box 4253
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 Sebring, Fl.	28 Sebring, Fl.
24 33872	29 33871
25 USA	30 U.S.A

3. Date Incorporated or Qualified	02/28/1997	
4. FEI Number	65-0716549	Applied For
		Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
RACE, JOY 1229 NAHAW AVENUE SEBRING FL	81 Name Gary mooney
	82 Street Address (P.O. Box Number is Not Acceptable) 127 Sharon ave
	83
	84 City Sebring FL 85 Zip Code 33872

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]* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	PO President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RACE, JOY	1.2 NAME	Gary mooney
STREET ADDRESS	1229 NAHAW AVENUE	1.3 STREET ADDRESS	127 Sharon ave.
CITY-ST-ZIP	SEBRING FL	1.4 CITY-ST-ZIP	Sebring, Fl. 33872
TITLE	VD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	VD Vice President <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PADGETT, BRIGITTE	2.2 NAME	Joy Race
STREET ADDRESS	4230 MANDARIN ROAD	2.3 STREET ADDRESS	434 Rose ave.
CITY-ST-ZIP	SEBRING FL 33872	2.4 CITY-ST-ZIP	Sebring, Fl. 33870
TITLE	SD <input type="checkbox"/> DELETE	3.1 TITLE	SD <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THOMAS, CHERYL	3.2 NAME	
STREET ADDRESS	2102 ROSELAND AVE.	3.3 STREET ADDRESS	
CITY-ST-ZIP	SEBRING FL 33870	3.4 CITY-ST-ZIP	
TITLE	TD <input checked="" type="checkbox"/> DELETE	4.1 TITLE	TD Treasurer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DUNN, THOMAS	4.2 NAME	Natalie Grubb
STREET ADDRESS	5902 GOLDEN ROAD	4.3 STREET ADDRESS	3345 Sparta Rd.
CITY-ST-ZIP	SEBRING FL 33872	4.4 CITY-ST-ZIP	Sebring, Fl. 33872
TITLE	D <input checked="" type="checkbox"/> DELETE	5.1 TITLE	D Board Commissioner <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BOZEMAN, RICHARD	5.2 NAME	5902 Golden Rd. Thomas Dunn
STREET ADDRESS	5904 TRACTOR RD.	5.3 STREET ADDRESS	5902 Golden Rd.
CITY-ST-ZIP	SEBRING FL 33872	5.4 CITY-ST-ZIP	Sebring, Fl. 33872
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

Joy m. Race

CR2E037 (10/97)