## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N97000001384

FILED Jan 08, 2007 Secretary of State

Entity Name: FORT MYERS SCORPIONS SOFTBALL, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	LAIRE LANE ERS, FL 33908			
Current M	lailing Address	::	New Mailing Addres	ss:
	AULIEU COURT ERS, FL 33908			
FEI Number	: 65-0736600	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	d Address of Cu	ırrent Registered Agent:	Name and Address	of New Registered Agent:
19831 ALĹ	, THOMAS R LAIRE LANE ERS, FL 33912	US		
	e named entity su e of Florida.	ubmits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
in the State	e of Florida.	ubmits this statement for the	purpose of changing its registere	ed office or registered agent, or both,
n the State	e of Florida.	ubmits this statement for the		ed office or registered agent, or both,  Date
in the State	e of Florida.	c Signature of Registered Ag	ent	
in the State SIGNATUI  OFFICER  Title: Name: Address:	e of Florida.  RE: Electronic  S AND DIRECT	c Signature of Registered Ag ORS: Delete IAS R LANE	ent	Date
in the State SIGNATUI  OFFICER  Title: Name: Address: City-St-Zip: Title: Name: Address:	e of Florida.  RE: Electronic  S AND DIRECT  D () I  ASHWILL, THOM 19831 ALLAIRE FORT MYERS, F	C Signature of Registered Ag ORS: Delete IAS R LANE IL 33912 Delete IY	ent  ADDITIONS/CHANG  Title:  Name:  Address:	Date SES TO OFFICERS AND DIRECTO
in the State	e of Florida.  RE: Electronic  S AND DIRECT  D () I  ASHWILL, THOM 19831 ALLAIRE FORT MYERS, F  D (X) I  FARRELL, TAMM 9009 FRANK RO FORT MYERS, F	C Signature of Registered Ag ORS: Delete IAS R LANE IL 33912 Delete MY AD IL 33912 Delete	ent  ADDITIONS/CHANG  Title: Name: Address: City-St-Zip:  Title: Name: Address:	Date  BES TO OFFICERS AND DIRECTO  ( ) Change ( ) Addition

I hereby certify that the information supplied with this filing does not qualify for the 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: THOMAS R. ASHWILL D 01/08/2007