

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90998 042 ****61.25

DOCUMENT # N97000006493

1. Entity Name

HIGHLANDS COUNTY SENIOR SOFTBALL LEAGUE, INC.



Principal Place of Business

1707 LAKE PIONEER AVENUE
AVON PARK FL 33825

Mailing Address

4343 SCHUMACHER ROAD
176E
SEBRING FL 33872

2. Principal Place of Business

4917 ELM ST.

3. Mailing Address

4917 ELM ST.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

SEBRING FLA.

Zip

Country

Zip

Country

33875

HIGHLANDS

4. FEI Number

65-0796202

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KAPALIN, JERRY
1707 LAKE PIONEER AVENUE
AVON PARK FL 33825

Name

CURTIS M. BROWN

Street Address (P.O. Box Number is Not Acceptable)

4917 ELM ST.

City

SEBRING

FL

Zip Code

33875

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Curtis M. Brown

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

04-20-2004

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
BROWN, CURTIS M
4917 ELM STREET
SEBRING FL 33870 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
KAPALIN, JERRY
1707 LAKE PIONEER AVENUE
AVON PARK FL 33825 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
BELL, HARRY
4343 SCHUMACHER ROAD, 176 E
SEBRING FL 33870 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
BELL, HARRY
4343 SCHUMACHER ROAD, #176E
SEBRING FL 33870 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPB
MORGAN, JAMES
145 BOUGAINVILLEA ST.
LAKE PLACID FLA. ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Curtis M. Brown

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04-20-04 (863) 385-3380

Date

Daytime Phone #