

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002515

FILED  
Jan 25, 2007  
Secretary of State

**Entity Name:** OVER FIFTY SENIOR SOFTBALL ASSOCIATION OF PORT ST LUCIE, INC.

**Current Principal Place of Business:**

1600 NE DIXIE HWY  
B11/102  
JENSEN BEACH, FL 34957

**New Principal Place of Business:**

**Current Mailing Address:**

1600 NE DIXIE HWY  
B11/102  
JENSEN BEACH, FL 34957

**New Mailing Address:**

**FEI Number:** 65-0903534

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RICHTER, CARL L DT  
1600 NE DIXIE HWY  
B11/102  
JENSEN BEACH, FL 34957 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DC ( ) Delete  
Name: COLUCCO, JOHN  
Address: 1561 SE MAXIL  
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: DP ( ) Delete  
Name: ESPOSITO, CARLO  
Address: 2520 SE ANCHORAGE COVE  
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: DVP ( ) Delete  
Name: MCCANN, RICHARD  
Address: 2069 SE WILDMeadow CIRCLE  
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: DT ( ) Delete  
Name: RICHTER, CARL L  
Address: 1600 NE DIXIE HWY B11/102  
City-St-Zip: JENSEN BEACH, FL 34957

Title: DS ( ) Delete  
Name: SULLIVAN, BUD  
Address: 2072 SW DANFORTH  
City-St-Zip: PALM CITY, FL 34990

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: DVP (X) Change ( ) Addition  
Name: VITTI, CIRILLO JERRY  
Address: 2310 SE CHARLESTON DR  
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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: CARL L RICHTER

DT

01/25/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date