

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002515

FILED
Jan 05, 2011
Secretary of State

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

Current Principal Place of Business:

914 SW GRAND RESERVE BLVD
PORT ST. LUCIE, FL 34986

New Principal Place of Business:

Current Mailing Address:

914 SW GRAND RESERVE BLVD
PORT ST. LUCIE, FL 34986

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:

O'NEILL, JOHN L DT
914 SW GRAND RESERVE BLVD
PORT ST. LUCIE, FL 34986 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: D2VP
Name: BROWN, FLOYD
Address: 672 SE NORSEMAND DRIVE
City-St-Zip: PORT SAINT LUCIE, FL 34984

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

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

Title: DT
Name: O'NEILL, JOHN L
Address: 914 SW GRAND RESERVE BLVD
City-St-Zip: PORT ST. LUCIE, FL 34986

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

I hereby 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 all other like empowered.

SIGNATURE: JOHN L. O'NEILL

DT

01/05/2011

Electronic Signature of Signing Officer or Director

Date