2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 17, 2004
Secretary of State

DOCUMENT# N98000003051

Entity Name: GOLDEN GATE HEATWAVE SOFTBALL ASSOCIATION, INC.

Current Principal Place of Business:

850 31ST ST SW
NAPLES, FL 34117

New Principal Place of Business:

Current Mailing Address:

850 31ST ST SW
NAPLES, FL 34117

New Mailing Address:

FEI Number: 59-3509014 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

STEWART, JAMES C JR
2121 COUNTY ROAD 951
SUITE 101
GOLDEN GATE, FL 33999 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: D ( ) Delete
Name: SARDINA, JORGE M
Address: 4795 GOLDEN GATE PARKWAY
City-St-Zip: GOLDEN GATE, FL 34116

Title: D ( ) Delete
Name: SARDINA, SUSAN
Address: 2261 16TH AVE SW
City-St-Zip: NAPLES, FL 34117

Title: D ( ) Delete
Name: STEVENS, JEFF
Address: 850 31ST ST SW
City-St-Zip: NAPLES, FL 34117

Title: D (X) Delete
Name: CAPLE, DAVE
Address: 571 27TH ST NW
City-St-Zip: NAPLES, FL 34117

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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 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: JEFF STEVENS D 03/17/2004

Electronic Signature of Signing Officer or Director — Date