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2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

Jan 15, 2003 8:00 am § Secretary of State DOCUMENT # N98000004826 1. Entity Name 01-15-2003 90184 044 ****61.25 OSCEOLA GIRLS FASTPITCH, INC. Principal Place of Business Mailing Address 1650 GRANADA BLVD. 1650 GRANADA BLVD. KISSIMMEE FL 34746 KISSIMMEE FL 34746 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State City & State 4. FEI Number 59-3535772 Applied For Not Applicable Zip Country Country 5. Certificate of Status Desired \$8.75 Additional 6. Name and Address of Current Registered Agent .7. Name and Address of New Registered Agent Name HORD, RICHARD W Street Address (P.O. Box Number is Not Acceptable) 1650 GRANADA BLVD. KISSIMMEE FL 34746 City Zip Code 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 SIGNATURE (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61,25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE ☐ Change HORD, RICHARD W ☐ Addition NAME STREET ADDRESS 1650 GRANADA AVE. STREET ADDRESS CITY-ST-ZIP KISSIMMEE FL 34741 **CR2E037** CITY-ST-ZIP TITLE Delete TITLE NAME PEREIRA, KEITH ☐ Addition NAME STREET ADDRESS 1854 DESTINY BLVD. STREET ADDRESS CITY-ST-ZIP KISSIMMEE FL 34741 CITY-ST-ZIP . TITLE Delete TITLE ☐ Change ☐ Addition NAME BILLER, JEFF NAME STREET ADDRESS 1684 EVERGREEN ST. STREET ADDRESS CITY-ST-ZIP KISSIMMEE FL 34746 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change NAME ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE NAME Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS

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

CITY-ST-ZIP

SIGNATURE: