

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED

2008 DEC 22 PM 4:10

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



12022008 REIN-NP CR2E099 (1/07)

DOCUMENT # N98000005214 1. Entity Name J.P.T. GIRLS' FASTPITCH SOFTBALL BOOSTER CLUB, INC.					
Principal Place of Business 8553 NW 8TH COURT C/O SUSAN HUFFMAN CORAL SPRINGS, FL 33071			Mailing Address 8553 NW 8TH COURT C/O SUSAN HUFFMAN CORAL SPRINGS, FL 33071		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 65-0860307	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
HUFFMAN, SUSAN 8553 NW 8TH COURT CORAL SPRINGS, FL 33071				Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 <small>Signature, typed or printed name of registered agent and title (if applicable)</small>				DATE <u>12/19/08</u> <small>(NOTE: Registered Agent signature required when reinstating)</small>	
FILE NOW!!! FEE IS \$61.25 After January 1, 2009, Fee will be \$122.50			In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LEVINE, NEIL 370 NW 111 AVE CORAL SPRINGS, FL 33071	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HUFFMAN, SUSAN A 8553 NW 8TH COURT CORAL SPRINGS, FL 33071	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LUCAS, STEVE 1382 NW 100TH AVE CORAL SPRINGS, FL 33071	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GOMES, ROBYN 1236 NW 91ST AVENUE CORAL SPRINGS, FL 33071	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	100139204091 12/22/08--01051--012 **61.25	<input type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Andrew Ponnock 10163 Vestal Court Coral Springs, FL 33065	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
REINSTATEMENT 2008			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
SIGNATURE:			Date <u>12/19/08</u> Daytime Phone #		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.					