2003 NOT-FOR-PROFIT CORPORATION

UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N9900005766



FILED
Apr 30, 2003 8:00 am §
Secretary of State

WEST PASCO LADY ROCKETS SOFTBALL ASSOCIATION, IN C.				. 04-30-2003 \$	90103 013 ****61.	.23
Principal Place of Business 4924 BAYPARK DRIVE PORT RICHEY FL 34868		Mailing Address 4924 BAYPARK DRIVE PORT RICHEY FL 34668		7y + #9****		14 8 - 8 111 - 1 88 1
2. Principal Place of Business		3. Mailing Address				
Suite, Apt. #, etc.		Suite, Apt. #, etc.		CHECK HERE I	F MAKING CHANGES	
City & State		City & State		4. FEI Number 59-3591762 Applied For Not Applicable		
Zip	Country	Zip	Country	-5Certificate of Status Desired	\$9.75 A-	litional
6.	Name and Address of Current F	Registered Agent		7. Name and Address of New Ro	<u>-</u>	
			Name			
DEAK, RONALD D 4924 BAYPARK DRIVE		Street Address (P.O. Box Number is Not Acceptable)				
PORT RICHEY FL 34668						
			City		FL Zip Code	e
		the purpose of changing its reg	istered office or registe	red agent, or both, in the State of Flor	rida. I am familiar with,	and accept
the obligations of	registered agent.	A Lea	D WDW	CACINO III	108/102	
SIGNATURE Stoneture	re, typed or printed name of registered agent ar	od title if anoline ble (NOTE: Re	gistered Agent signature require	d when reinstation	2170-9	
	a, typed of printed hand of logistered agent a	to the it approaches (110 IE. 110	galara a galara a galara	- The state of the		
FILE NOW: FEE IS \$61.25 9. Election Camp Trust Fund Cor			\$5.00 May Be Mal	ke Check Payable	to	
		Trust Fund Cont	ribution,		a Department of S	
10.	OFFICERS AND DIR	ECTORS	11.		a Department of S	itate 10
TITLE PD	OFFICERS AND DIR			Added to Fees Florid	a Department of S	State
NAME PD DEAK STREET ADDRESS 4924	K, RONALD D BAYPARK DRIVE	ECTORS	11.	Added to Fees Florid	a Department of S	itate 10
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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.

SIGNATURE: