

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006268

FILED
May 02, 2008
Secretary of State

Entity Name: LUTZ LEAGUERETTES SOFTBALL LEAGUE, INC.

Current Principal Place of Business:

OSCAR COOLER PARK
LUTZ LAKE FERN ROAD
LUTZ, FL 33548 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2313
LUTZ, FL 33548 US

New Mailing Address:

FEI Number: 59-3604821 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ANSELMO, ANTHONY T
4109 HARBOR LAKE DRIVE
LUTZ, FL 33558 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: P () Delete
Name: SCIOS, RONALD J
Address: P.O. BOX 2313
City-St-Zip: LUTZ, FL 33548

Title: 1VP () Delete
Name: HAND, HEATHER
Address: P.O. BOX 2313
City-St-Zip: LUTZ, FL 33548

Title: 2VP () Delete
Name: DITTMAN, CARLA
Address: P.O. BOX 2313
City-St-Zip: LUTZ, FL 33548

Title: SEC () Delete
Name: STURGESS, SUZANNE
Address: P.O. BOX 2313
City-St-Zip: LUTZ, FL 33558

Title: TRES () Delete
Name: ANSELMO, ANTHONY T
Address: P.O. BOX 2313
City-St-Zip: LUTZ, FL 33548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: 1VP (X) Change () Addition
Name: SUTCH, JASON
Address: P.O. BOX 2313
City-St-Zip: LUTZ, FL 33548

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 exemption stated 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 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: ANTHONY ANSELMO

TRES

05/02/2008

Electronic Signature of Signing Officer or Director

Date