2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000044609

Entity Name: STRIKE THREE SOFTBALL INC.

FILED Apr 30, 2009 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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2831 CARDASSI DRIVE 10936 SONORA DRIVE OCOEE, FL 34761 US GIBSONTON, FL 33534 US

Current Mailing Address: New Mailing Address:

2831 CARDASSI DRIVE 10936 SONORA DRIVE OCOEE, FL 34761 GIBSONTON, FL 33534 US

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ROSENBERG, HARLAN
2831 CARDASSI DRIVE
0COEE, FL 34761 US
ELLINGSWORTH, WALTER
10936 SONORA DRIVE
GIBSONTON, FL 33534 US

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: WALTER ELLINGSWORTH 04/30/2009

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition ROSENBERG, HARLAN ELLINGSWORTH, WALTER Name: Name: 2831 CARDASSI DRIVE 10936 SONORA DRIVE Address: Address: City-St-Zip: OCOEE, FL 34761 US City-St-Zip: GIBSONTON, FL 33534 US

Title: SEC () Delete Title: () Change () Addition

 Name:
 ELLINGSWORTH, PATRICIA
 Name:

 Address:
 10936 SONORA DRIVE
 Address:

 City-St-Zip:
 GIBSONTON, FL 33534 US
 City-St-Zip:

Title: TRES () Delete Title: () Change () Addition

 Name:
 MOFFITT, JOHN
 Name:

 Address:
 773 SILVERWOOD DRIVE
 Address:

 City-St-Zip:
 LAKE MARY, FL 32746 US
 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: WALTER ELLINGSWORTH P 04/30/2009