2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2020
Secretary of State
5848763792CC

DOCUMENT# N13000009049

Entity Name: CHIEFLAND FASTPITCH BOOSTERS, INC

Current Principal Place of Business:

315 N. MAIN STREET
CHIEFLAND, FL 32626

Current Mailing Address:

PO BOX 1302
CHIEFLAND, FL 32644 US

FEI Number: 46-3817762

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BEAUCHAMP, JEFFREY D
105 E PARK AVE
CHIEFLAND, FL 32626 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: JEFFREY D BEAUCHAMP 05/05/2020

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	TREASURER
Name	ANDERSON, AMY
Address	1771 NW ALT 27
City-State-Zip:	CHIEFLAND FL 32626

Title	SECRETARY
Name	SULLIVAN, TONYA
Address	758 SE 95 PLACE
City-State-Zip:	TRENTON FL 32693

Title	DIRECTOR
Name	OSTEEN, JAMIE
Address	14491 NW 66TH AVENUE
City-State-Zip:	CHIEFLAND FL 32626

Title	DIRECTOR
Name	ROGERS, APRIL
Address	6051 NW 81 PLACE
City-State-Zip:	CHIEFLAND FL 32626

Title	DIR
Name	STALVEY, HARLAND
Address	6251 NW 150TH ST
City-State-Zip:	CHIEFLAND FL 32626

Title	DIRECTOR
Name	ROGERS, DAVID
Address	6051 NW 81 PLACE
City-State-Zip:	CHIEFLAND FL 32626

Title	PRESIDENT
Name	SWAIN, MARK
Address	6891 NW 60 AVENUE
City-State-Zip:	CHIEFLAND FL 32626

Title	DIRECTOR
Name	BEDFORD, LYNN
Address	2850 NE CR 337
City-State-Zip:	BRONSON FL 32621

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I hereby 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 all other like empowered.

SIGNATURE: AMY ANDERSON TREASURER 05/05/2020

Electronic Signature of Signing Officer/Director Detail — Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	SWAIN , STACY
Address	6891 NW 60 AVENUE
City-State-Zip:	CHIEFLAND FL 32626

Title	DIRECTOR
Name	FISHER, WENDY
Address	6751 SW 118 TERRACE
City-State-Zip:	CEDAR KEY FL 32625

Title	DIRECTOR
Name	DONALDSON, TIFFANY
Address	308 SW 8 CT
City-State-Zip:	CHIEFLAND FL 32626

Title	DIRECTOR
Name	BARLOW, ALESA
Address	11850 NW 70 AVENUE
City-State-Zip:	CHIEFLAND FL 32626