

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N14000009467

**Entity Name:** BUCHHOLZ SOFTBALL BOOSTERS INC.

**Current Principal Place of Business:**

5510 NW 27TH AVENUE  
GAINESVILLE, FL 32606

**Current Mailing Address:**

PO BOX 358604  
GAINESVILLE, FL 32635 US

**FEI Number:** 47-2031338

**Certificate of Status Desired:** No

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

PAGE, ROBERT L  
10254 NW 153RD TERRACE  
ALACHUA, FL 32615 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title VP  
Name PAGE, ROBERT  
Address 10254 NW 153RD TERRACE  
City-State-Zip: ALACHUA FL 32615

Title TR  
Name TRUELUCK, TEAMEIKA  
Address 3700 SW 27TH STREET #E-206  
City-State-Zip: GAINESVILLE FL 32608

Title PRESIDENT  
Name SCHENTRUP, JOSEPH  
Address 9215 NW 26TH AVENUE  
City-State-Zip: GAINESVILLE FL 32606

Title D  
Name LEVERETT, CORY  
Address 12244 NW 10 PL  
City-State-Zip: GAINESVILLE FL 32669

Title S  
Name GARRETT, JULIE  
Address 9306 NW 12 PL  
City-State-Zip: GAINESVILLE FL 32606

Title D  
Name STILL, TOBY  
Address 13618 SW 2 LN  
City-State-Zip: NEWSBERRY FL 32669

Title D  
Name SPARROW, KENNY  
Address 5510 NW 27 AVE  
City-State-Zip: GAINESVILLE FL 32606

*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:** ROBERT PAGE

VP

03/29/2017

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date