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Secretary of State

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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 705793

1. Corporation Name

NORTH EAST LITTLE LEAGUE, INC.

Principal Place of Business

150 SECOND AVENUE NORTH  
SUITE 1100  
ST. PETERSBURG FL 33701

Mailing Address

150 SECOND AVENUE NORTH  
SUITE 1100  
ST. PETERSBURG FL 33701



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

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2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

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30

3. Date Incorporated or Qualified

06/24/1963

4. FEI Number  
23-7378070

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

SMITH, THOMAS B  
150 SECOND AVENUE NORTH  
SUITE 1100  
ST. PETERSBURG FL 33701

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME MOELLER, DAN  
STREET ADDRESS 202 44TH AVENUE NORTH  
CITY-ST-ZIP ST. PETERSBURG FL 33703  DELETE

TITLE 1VPD  
NAME JENSEN, LARRY  
STREET ADDRESS 7261 18TH STREET N.E.  
CITY-ST-ZIP ST. LAUDERDALE FL 33702  DELETE

TITLE 2VPD  
NAME WALTER, DOUG  
STREET ADDRESS 7921 3RD STREET NO.  
CITY-ST-ZIP ST. PETERSBURG FL 33702  DELETE

TITLE 3VPD  
NAME JIANNETTI, FRANK  
STREET ADDRESS 345 COFFEE POT DRIVE, N.E.  
CITY-ST-ZIP ST. PETERSBURG FL 33704  DELETE

TITLE SD  
NAME JENSEN, JACKIE  
STREET ADDRESS 7261 18TH STREET, N.E.  
CITY-ST-ZIP ST. PETERSBURG FL 33702  DELETE

TITLE TD  
NAME MCKEON, KEVIN  
STREET ADDRESS 655 16TH AVE., N.E.  
CITY-ST-ZIP ST. PETERSBURG FL 33701  DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  Change  Addition  
2.2 NAME TERRY RYNOlds  
2.3 STREET ADDRESS 1075 MARLO DRIVE NE  
2.4 CITY-ST-ZIP ST PTK FL 33702

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  Change  Addition  
4.2 NAME TONY BARNS  
4.3 STREET ADDRESS 758 41ST AVE NE  
4.4 CITY-ST-ZIP ST PTK FL 33703

5.1 TITLE  Change  Addition  
5.2 NAME LISA MOELLER  
5.3 STREET ADDRESS 202 44 AVE N.  
5.4 CITY-ST-ZIP ST PTK FL 33703

6.1 TITLE  Change  Addition  
6.2 NAME RHONDA LUBER  
6.3 STREET ADDRESS 4175 13TH WAY NE  
6.4 CITY-ST-ZIP ST PTK FL 33703

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

SIGNATURE REQUIRED

1/29/99

341-2511

CR2E037 (1/198)