

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 24, 2004 8:00 am
Secretary of State

02-24-2004 90010 014 ****70.00

DOCUMENT # 708631

1. Entity Name

INDIAN RIVER COUNTY LITTLE LEAGUE, INC.



Principal Place of Business

3995 18TH STREET
P.O. BOX 2519
VERO BEACH FL 32961-9519

Mailing Address

3995 18TH STREET
P.O. BOX 2519
VERO BEACH FL 32961
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-0950327

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

HINTON, PATTY
3176 62ND DRIVE
VERO BEACH FL 32966

Name

ALAN K. SCHACHT

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

1010 SW 47TH AVE.

City

VERO BEACH

FL

Zip Code

32968

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	VP	<input checked="" type="checkbox"/> Delete
NAME	CARLTON, VICKY	
STREET ADDRESS	905 52 AVENUE	
CITY-ST-ZIP	VERO BEACH FL 32962	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	ENRICO, JEANNE	
STREET ADDRESS	185 14 AVENUE	
CITY-ST-ZIP	VERO BEACH FL 32962	
TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	WHITTINGTON, PENNY.	
STREET ADDRESS	1413 32 AVENUE SW	
CITY-ST-ZIP	VERO BEACH FL 32968	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PRESIDENT P/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WILLIAM HUNTER	
STREET ADDRESS	945 36TH AVE	
CITY-ST-ZIP	VERO BEACH, FL 32960	
TITLE	VICE PRESIDENT VP/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	CHARLES ORRISON	
STREET ADDRESS	465 61ST AVE.	
CITY-ST-ZIP	VERO BEACH, FL	
TITLE	TREASURER T/D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ALAN K. SCHACHT	
STREET ADDRESS	1010 SW 47TH AVE	
CITY-ST-ZIP	VERO BEACH, FL 32968	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ALAN K. SCHACHT

2/7/04

(772) 567-5483

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #