


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 12, 2007 08:00 AM
Secretary of State

DOCUMENT # N00879

1. Entity Name
THE MIDWEST LEAGUE OF PROFESSIONAL BASEBALL CLUBS, INC.



Principal Place of Business 1118 CRANSTON RD BELOIT, WI 53511 US	Mailing Address 1118 CRANSTON RD. P.O. BOX 936 BELOIT, WI 35311 US
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DO NOT WRITE IN THIS SPACE



05212007 No Chg-NP CR2E037 (4/06)

4. FEI Number 42-1246059	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

**WENDEL, JOHN F.
 5300 S FLORIDA AVE.
 LAKELAND, FL 33803**

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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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
 Due by September 14, 2007**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD SPELIUS, GEORGE H. 1118 CRANSTON RD BELOIT, WI
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LARSON, C. EDWARD 1118 CRANSTON ROAD BELOIT, WI
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD NUSSBAUM, RICHARD A. 1118 CRANSTON ROAD BELOIT, WI
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 06/12/07-80004-001-61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: George H. Spelius **GEORGE H. SPELIUS** **6-6-07** **(608) 364 1188**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #