

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03857

FILED  
Jan 22, 2006  
Secretary of State

Entity Name: ORANGE BASEBALL ASSOCIATION, INC.

**Current Principal Place of Business:**

1625 W. PRINCETON STREET  
ORLANDO, FL 32804 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 540898  
ORLANDO, FL 328540898

**New Mailing Address:**

FEI Number: 59-2504131

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SCALETТА, FRANK J  
8228 ROSE GROVES ROAD  
ORLANDO, FL 32818 US

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

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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: FENNESSY, DAVID  
Address: 1625 W. PRINCETON STREET  
City-St-Zip: ORLANDO, FL 32804

Title: VPD ( ) Delete  
Name: FLAY, KEVIN  
Address: 527 W SPRINGTREE WAY  
City-St-Zip: LAKE MARY, FL 32746

Title: S ( ) Delete  
Name: KIRK, E FRANK  
Address: 2035 COLLIER DR  
City-St-Zip: FERN PARK, FL 32730

Title: TD ( ) Delete  
Name: SCALETТА, FRANK  
Address: 8228 ROSE GROVES ROAD  
City-St-Zip: ORLANDO, FL 32818

Title: D ( ) Delete  
Name: QUIRELLO, JOHN  
Address: 1470 CASA RIO DR  
City-St-Zip: ORLANDO, FL 32825

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: BREAZEAL, CLAY  
Address: 14250 ISLAMORADA DR  
City-St-Zip: ORLANDO, FL 32837

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: DAVID FENNESSY

P

01/22/2006

Electronic Signature of Signing Officer or Director

Date