

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006012

FILED  
Jan 10, 2005  
Secretary of State

Entity Name: YULEE LITTLE LEAGUE, INC.

## Current Principal Place of Business:

686 GOODBREAD DRIVE  
YULEE, FL 32097

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 1243  
YULEE, FL 320411243

## New Mailing Address:

FEI Number: 51-0429512

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

WILLIAMS, IVAN W  
85245 BLACKMON  
YULEE, FL 32097 US

## Name and Address of New Registered Agent:

WILLIAMS, IVAN W  
85245 BLACKMON RD  
YULEE, FL 32097 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: MELISSA WILLIAMS

01/10/2005

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: WILLIAMS, MELISSA  
Address: 85245 BLACKMON RD  
City-St-Zip: YULEE, FL 32097

Title: D ( ) Delete  
Name: WILLIAMS, IVAN  
Address: 1219 BLACKMON RD  
City-St-Zip: YULEE, FL 32097

Title: D ( ) Delete  
Name: DAUGHTRY, CONNIE  
Address: 2536 WINGATE LENDING RD  
City-St-Zip: YULEE, FL 32097

Title: D ( ) Delete  
Name: SMITH, KIM  
Address: 1655 CALLAWAY DR  
City-St-Zip: YULEE, FL 32097

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change ( ) Addition  
Name: WILLIAMS, MELISSA D  
Address: 85245 BLACKMON RD  
City-St-Zip: YULEE, FL 32097

Title: D (X) Change ( ) Addition  
Name: WILLIAMS, IVAN  
Address: 85245 BLACKMON RD  
City-St-Zip: YULEE, FL 32097

Title: D (X) Change ( ) Addition  
Name: DAUGHTRY, CONNIE  
Address: 2536 WINGATE LANDING RD  
City-St-Zip: YULEE, FL 32097

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 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 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: MELISSA WILLIMAS

D

01/10/2005

Electronic Signature of Signing Officer or Director

Date