2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22116

FILED Jul 15, 2004 Secretary of State

Entity Name: SAY BASEBALL OF CENTRAL FLORIDA, INC.

Current Principal Place of Business: New Principal Place of Business:

PO BOX 561556

ORLANDO, FL 328561556 US

Current Mailing Address: New Mailing Address:

PO BOX 561556

ORLANDO, FL 328561556 US

FEI Number: 59-3040163 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

NEUSAENGER, JOHN M 4207 BELLE GROVE COURT BELL ISLE, FL 32812 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:

\L. _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Name: MEREDITH, JAY Name: MEREDITH, JAY

Address: 3817 GATLIN WOODS DRIVE Address: 3817 GATLIN WOODS DRIVE

City-St-Zip: ORLANDO, FL 32812 City-St-Zip: ORLANDO, FL 32812

Title: DV () Delete Title: DP (X) Change () Addition Name: NAVARRO, JULIO Name: GRABHORN, DANIEL

Name: NAVARRO, JULIO Name: GRABHORN, DANIEL
Address: 4837 TELLSON PLACE Address: 437 HARBOUR OAKS PT DR
City-St-Zip: ORLANDO, FL 32812 City-St-Zip: ORLANDO, FL 32809

Title: DT () Delete Title: () Change () Addition

 Name:
 NEUSAENGER, JOHN
 Name:

 Address:
 3328 S. SEMORAN BLVD., #2
 Address:

 City-St-Zip:
 ORLANDO, FL 32822
 City-St-Zip:

Title: DS () Delete Title: DS (X) Change () Addition

Name: KENNDEY, SHARI A Name: AMATO, DANIEL

Address: 4262 LILLIAN HALL LANE Address: 6421 SAINT PARTIN PLACE City-St-Zip: ORLANDO, FL 32812 City-St-Zip: ORLANDO, FL 32812

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: DAN GRABHORN DP 07/15/2004