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Feb 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N31260 (5)
1. Corporation Name
MANATEE G.T. BRAY EAST LITTLE LEAGUE, INC.



Principal Place of Business 1024 1000 24TH ST. E. APT. 704 BRADENTON FL 34208 US	Mailing Address PO. BOX 1662 APT. 704 BRADENTON FL 34208 US
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3. Date Incorporated or Qualified 03/20/1989	
4. FEI Number 65-0103207	Applied For <input type="checkbox"/> Not Applicable

2. Principal Place of Business 21 1024 24th St. E	2a. Mailing Address 26 P.O. Box 1662
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State 23 BRADENTON FL	City & State 27 BRADENTON FL
Zip 24 34208	Country 25 USA
Country 29 USA	Zip 30 34206

6. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent
**HALL, SANDY
811 22 ST. W.
APT. 704
BRADENTON FL 34209**

10. Name and Address of New Registered Agent
**81 Name NORMA LLOYD
82 Street Address (P.O. Box Number is Not Acceptable) 1007 34th AVENUE EAST
83
84 City BRADENTON FL 85 Zip 34208**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.
SIGNATURE *Norma Lloyd* DATE **2/12/98**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SMITH, GREG	1.2 NAME	
STREET ADDRESS	2718 61 ST. E.	1.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	1.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HABBOR, JENNIFER	2.2 NAME	
STREET ADDRESS	1515 34TH. AVE E.	2.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	2.4 CITY-ST-ZIP	
TITLE	VP <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	KENNEDY, MIKE	3.2 NAME	VP DAVID OWENS
STREET ADDRESS	906 134TH ST EAST	3.3 STREET ADDRESS	2112 55th AVE. E.
CITY-ST-ZIP	BRADENTON FL	3.4 CITY-ST-ZIP	BRADENTON, FL
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STANLEY, PUMPHREY	4.2 NAME	
STREET ADDRESS	5818 25TH ST., WEST	4.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	4.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WOOD, RICHARD	5.2 NAME	
STREET ADDRESS	5607 37TH AVENUE EAST	5.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	5.4 CITY-ST-ZIP	
TITLE	PD <input checked="" type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HALL, SANDY	6.2 NAME	PD NORMA LLOYD
STREET ADDRESS	811 22NDST. W.	6.3 STREET ADDRESS	1007 34th AVE. EAST
CITY-ST-ZIP	BRADENTON FL	6.4 CITY-ST-ZIP	BRADENTON, FL

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.
SIGNATURE: *Sandy Smith* DATE: **2/12/98** ID: **941/746-0172**

CR2E037 (10/97)