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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N41405

1. Corporation Name

EAST CLEARWATER-SAFETY HARBOR LITTLE LEAGUE, INC

Principal Place of Business

P.O. BOX 113  
SAFETY HARBOR FL 34695

Mailing Address

P.O. BOX 113  
SAFETY HARBOR FL 34695



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

12/20/1990

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number  
59-3048243

Applied For  
Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired  \$8.75 Additional Fee Required

23 Zip Country

28 Zip Country

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

24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DONOVAN, DAN  
28 TURNSTONE DR.  
SAFETY HARBOR FL 34695

81 Name Kevin J. Thurber  
82 Street Address (P.O. Box Number is Not Acceptable)  
306 Los Prados Dr.  
83 Safety Harbor FL 34695  
84 City FL 85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  DELETE  
NAME SINGLETON, TED  
STREET ADDRESS 254 3RD AVE N  
CITY-ST-ZIP SAFETY HARBOR FL 34695

1.1 TITLE PD  Change  Addition  
1.2 NAME Thurber, Kevin  
1.3 STREET ADDRESS 306 Los Prados Dr.  
1.4 CITY-ST-ZIP Safety Harbor, FL 34695

TITLE PD  DELETE  
NAME DONOVAN, DAN  
STREET ADDRESS 28 TURNSTONE DR.  
CITY-ST-ZIP SAFETY HARBOR FL 34695

2.1 TITLE VD  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE VD  DELETE  
NAME HANNER, ED  
STREET ADDRESS 3537 FAIRVIEW ST.  
CITY-ST-ZIP SAFETY HARBOR FL 34695

3.1 TITLE T  Change  Addition  
3.2 NAME Becker, Jeff  
3.3 STREET ADDRESS 2127 N. Bay Hills Blvd.  
3.4 CITY-ST-ZIP Safety Harbor, FL 34695

TITLE SD  DELETE  
NAME RIGGS, CHARLES D III  
STREET ADDRESS 1804 PINE HILL DR.  
CITY-ST-ZIP SAFETY HARBOR FL

4.1 TITLE SD  Change  Addition  
4.2 NAME Simon, Lenny  
4.3 STREET ADDRESS 3058 Cascade Dr.  
4.4 CITY-ST-ZIP Clearwater, FL 33761

TITLE SD  DELETE  
NAME COWARD, LINDA  
STREET ADDRESS 3128 BLUE HERON  
CITY-ST-ZIP SAFETY HARBOR FL

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE D  DELETE  
NAME GUILANO, MIKE  
STREET ADDRESS 14 CLEARVIEW DR.  
CITY-ST-ZIP SAFETY HARBOR FL 34695

6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE:

*Kevin J. Thurber*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 29, 1999 724-1664  
Date Daytime Phone #

0072681

CR2E037 (1/98)