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Feb 13 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N92000000697 (4)

1. Corporation Name

TALLAHASSEE/LEON BABE RUTH LEAGUE, INC.



Principal Place of Business

Mailing Address

2748 MCFARLANE COURT
TALLAHASSEE FL 32303

P.O. BOX 14671
TALLAHASSEE FL 32317-4671

3. Date Incorporated or Qualified
12/09/1992

3a. Date of Last Report
01/31/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
59-3144456

Applied For
Not Applicable

21 Suite, Apt #, etc.

26 Suite, Apt #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes Yes No

24

25

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FLURY, DEBBIE
3552 CARRINGTON DR
TALLAHASSEE FL 32303

81 Name

FRANK WOOD

82 Street Address (P.O. Box Number is Not Acceptable)

83

3504 Rosemont Ridge

84 City

Tallahassee

FL

85 Zip Code
32312

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

Frank W. Wood

FRANK W. WOOD, PRESIDENT

2/10/97

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 PDD DELETE
NAME DUPREE, JAMES
STREET ADDRESS 1935 W INDIANHEAD DR
CITY-ST-ZIP TALLAHASSEE FL

1.1 TITLE PDD Change Addition
1.2 NAME Wood, Frank
1.3 STREET ADDRESS 3504 Rosemont Ridge
1.4 CITY-ST-ZIP Tallahassee FL 32312

TITLE V/D DELETE
NAME REDDING, CHARLEY
STREET ADDRESS 2008 DOGWOOD HILL
CITY-ST-ZIP TALLAHASSEE FL

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

TITLE S/D DELETE
NAME STRINGER, REID
STREET ADDRESS 4334 MILLWOOD LANE
CITY-ST-ZIP TALLAHASSEE FL

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE T/D DELETE
NAME FLURY, DEBBIE
STREET ADDRESS 3552 CARRINGTON DR
CITY-ST-ZIP TALLAHASSEE FL

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

14. I do 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:

Frank W. Wood
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/10/97
Date

904224-5511
Daytime Phone #0008785

CR2E037 (9/96)