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FILED

Feb 17 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS**DOCUMENT # N93000003857 (0)**

1. Corporation Name

DUNEDIN AMERICAN LITTLE LEAGUE, INC.

Principal Place of Business

Mailing Address

**373 DOUGLAS AVE
DUNEDIN FL 34698****P. O. BOX 481
DUNEDIN FL 34697-0481
US**3. Date Incorporated or Qualified
08/20/19933a. Date of Last Report
04/24/1996

2. Principal Place of Business

2a. Mailing Address

21**26**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22**27**

City & State

City & State

23**28**

Zip

Country

Zip

Country

24**25****29****30**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FERRARO, ROBERT F.
701 WESTFIELD COURT
DUNEDIN FL 34698****81** Name**82** Street Address (P.O. Box Number is Not Acceptable)**83****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	PD	☐ DELETE
NAME	GAJAN, ROSEMARY	
STREET ADDRESS	1039 SEDEEVA STREET	
CITY-ST-ZIP	CLEARWATER FL 34615	

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	

TITLE	VD	☐ DELETE
NAME	GARRIS, SUSAN	
STREET ADDRESS	887 EMERSON DRIVE	
CITY-ST-ZIP	DUNEDIN FL 34698	

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

TITLE	DS	☒ DELETE
NAME	STRICKENBARGER, RHONDA	
STREET ADDRESS	1988 RADCLIFF DRIVE	
CITY-ST-ZIP	CLEARWATER FL 34623	

3.1 TITLE	☒ Change ☐ Addition
3.2 NAME	SD DIANA MONNIER
3.3 STREET ADDRESS	1974 ELLIOTT DRIVE
3.4 CITY-ST-ZIP	CLEARWATER FL 34623

TITLE	TD	☐ DELETE
NAME	FERRARO, ROBERT F.	
STREET ADDRESS	701 WESTFIELD COURT	
CITY-ST-ZIP	DUNEDIN FL 34698	

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

TITLE	D	☐ DELETE
NAME	POOLE, MELISSA	
STREET ADDRESS	981 GROVEWOOD DRIVE	
CITY-ST-ZIP	DUNEDIN FL 34698	

5.1 TITLE	☒ Change ☐ Addition
5.2 NAME	VD
5.3 STREET ADDRESS	1070 PRBSTWICK PLACE
5.4 CITY-ST-ZIP	DUNEDIN FL 34698

TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

6.1 TITLE	☐ Change ☒ Addition
6.2 NAME	D Shellie GREGORY
6.3 STREET ADDRESS	969 GREENWAY AVENUE
6.4 CITY-ST-ZIP	DUNEDIN FL 34698

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0088315

CR2E037 (9/96)