

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006926

FILED
May 30, 2006
Secretary of State

Entity Name: NORTH RIVER AMERICAN LITTLE LEAGUE, INC.

Current Principal Place of Business:

PO BOX 1072
PALMETTO, FL 34221

New Principal Place of Business:

Current Mailing Address:

PO BOX 1072
PALMETTO, FL 34221

New Mailing Address:

FEI Number: 59-2261618 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

BIELAWSKI, RACHEL M
3819 5TH AVE WEST
PALMETTO, FL 34221 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BIELAWSKI, MARLENE
Address: 3819 5TH AVENUE WEST
City-St-Zip: PALMETTO, FL 34221

Title: VD () Delete
Name: BROWNING, MIKE
Address: 3328 5TH DRIVE WEST
City-St-Zip: PALMETTO, FL 34221

Title: TD () Delete
Name: FREY, DENNIS
Address: P.O. BOX 244
City-St-Zip: TERRA CEIA, FL 34250

Title: SD () Delete
Name: DIAZ, DORIS A
Address: 208 45TH STREET COURT WEST
City-St-Zip: PALMETTO, FL 34221

Title: CC () Delete
Name: VEDDER, BRAD
Address: 209 8TH STREET WEST
City-St-Zip: PALMETTO, FL 34221

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD (X) Change () Addition
Name: MERSCH, ANNE
Address: 1304 7TH ST. W.
City-St-Zip: PALMETTO, FL 34221

Title: SD (X) Change () Addition
Name: VEDDER, STACEY
Address: 209 8TH ST. W.
City-St-Zip: PALMETTO, FL 34221

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: MARLENE BIELAWSKI

PD

05/30/2006

Electronic Signature of Signing Officer or Director

Date