

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 31, 2003 8:00 am
Secretary of State

01-31-2003 90143 049 ****61.25

DOCUMENT # N98000006926

1. Entity Name

NORTH RIVER AMERICAN LITTLE LEAGUE, INC.



Principal Place of Business

**1804 6TH STREET WEST
PALMETTO FL 34221**

Mailing Address

**1804 6TH STREET WEST
PALMETTO FL 34221**

2. Principal Place of Business

P.O. Box 1072

Suite, Apt. #, etc.

Palmetto, FL

City & State

3. Mailing Address

P.O. Box 1072

Suite, Apt. #, etc.

Palmetto, FL

City & State



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2261618**

Applied For

☐ Not Applicable

Zip **34221**

Country **USA**

Zip **34221**

Country **USA**

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HOBBS, STACY
1804 6TH STREET WEST
PALMETTO FL 34221**

7. Name and Address of New Registered Agent

Name

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

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Stacy Hobbs

Stacy Hobbs

1/21/02

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **PD** ☐ Delete
NAME **HOBBS, STACY**
STREET ADDRESS **1804 6TH STREET WEST**
CITY-ST-ZIP **PALMETTO FL 34221**

TITLE **VD** ☐ Delete
NAME **HOBBS, GREG**
STREET ADDRESS **1804 6TH STREET WEST**
CITY-ST-ZIP **PALMETTO FL 34221**

TITLE **TD** ☐ Delete
NAME **ROY, PAM**
STREET ADDRESS **2011 21ST STREET WEST**
CITY-ST-ZIP **PALMETTO FL 34221**

TITLE **SD** ☐ Delete
NAME **PICK, LORI**
STREET ADDRESS **516 77TH STREET EAST**
CITY-ST-ZIP **PALMETTO FL 34221**

TITLE **VD** ☐ Delete
NAME **JASPER, JOHN**
STREET ADDRESS **523 36TH STREET WEST**
CITY-ST-ZIP **PALMETTO FL 34221**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Stacy W. Hobbs **Stacy W. Hobbs - President**

1/29/03 **941-744 3216**

CR2E037 (10/02)