2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706213

FILED Jul 15, 2005 Secretary of State

Entity Name: VENICE LITTLE LEAGUE, INC.

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 2154

VENICE, FL 342842154 US

Current Mailing Address: New Mailing Address:

P.O. BOX 2154

VENICE, FL 342842154 US

FEI Number: 23-7400963 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: Name and Address of New Registered Agent:

IORIO, DIANE IORIO, DIANE

322 GAUGIN DR 417 MURILLO DRIVE OSPREY, FL 34229 US NOKOMIS, FL 34275 US

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: DIANE IORIO 07/15/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

le: PD () Delete Title: PRES (X) Change () Addition

 Name:
 HITT, JAMES
 Name:
 MORSE, DAVID

 Address:
 215 GLEN OAK RD
 Address:
 515 BAYSHORE RD.

 City-St-Zip:
 VENICE, FL 34293
 City-St-Zip:
 OSPREY, FL 34229

Title: TD () Delete Title: TREA (X) Change () Addition

 Name:
 IORIO, DIANE
 Name:
 IORIO, DIANE

 Address:
 322 GAUGIN DR
 Address:
 322 GAUGIN DR

 City-St-Zip:
 OSPREY, FL 34229
 City-St-Zip:
 OSPREY, FL 34229

Title: S () Delete Title: SEC (X) Change () Addition

 Name:
 KRAUSS, SHELLY
 Name:
 KRAUSS, SHELLY

 Address:
 125 PADDINGTON RD
 Address:
 125 PADDINGTON RD

 City-St-Zip:
 VENICE, FL 34293
 City-St-Zip:
 VENICE, FL 34293

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DIANE IORIO TREA 07/15/2005