

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000010796

**FILED**  
**Mar 03, 2010**  
**Secretary of State**

**Entity Name:** NSB DUGOUT CLUB INC

**Current Principal Place of Business:**

2217 SWOOPE DR.  
NEW SMYRNA BEACH, FL 32168

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 635  
NEW SMYRNA BEACH, FL 32170

**New Mailing Address:**

**FEI Number:** 20-5844996

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

WEAVER, R. ALAN  
2217 SWOOPE DR.  
NEW SMYRNA BEACH, FL 32168 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:** DP  
**Name:** WRIGHT, PAUL J.  
**Address:** 880 CORBIN PARK RD.  
**City-St-Zip:** NEW SMYRNA BEACH, FL 32168

**Title:** DV  
**Name:** WEAVER, R. ALAN  
**Address:** 2217 SWOOPE DR.  
**City-St-Zip:** NEW SMYRNA BEACH, FL 32168

**Title:** DS  
**Name:** SOPOTNICK, JOSEPH A.  
**Address:** 2713 ROYAL PALM DR.  
**City-St-Zip:** EDGEWATER, FL 32141

I hereby 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 all other like empowered.

**SIGNATURE:** R ALAN WEAVER

DV

03/03/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date