

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 712892

**Entity Name:** PORT ST LUCIE LITTLE LEAGUE, INC.

**Current Principal Place of Business:**

1301 SE LYNGATE DRIVE  
PORT ST LUCIE, FL 34985

**Current Mailing Address:**

PO BOX 8055  
PORT SAINT LUCIE, FL 34985 US

**FEI Number:** 59-2156222

**Certificate of Status Desired:** No

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

COHEN, ANDREA  
12080 SW OAKWATER CT  
PORT ST LUCIE, FL 34987 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:** ANDREA COHEN

07/18/2020

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRES  
Name            SMITH, RICHARD  
Address        1865 SW LOFGREN AVE  
City-State-Zip: PORT ST LUCIE FL 34953

Title            VP  
Name            VAUGHN, AMY  
Address        1742 SE MARIANA RD  
City-State-Zip: PORT ST. LUCIE FL 34952

Title            TRE  
Name            COHEN, ANDREA  
Address        12080 SW OAKWATER CT  
City-State-Zip: PORT ST LUCIE FL 34987

Title            SECRETARY  
Name            TAYLOR, JODI  
Address        182 SW GLENWOOD DR  
City-State-Zip: PORT ST LUCIE FL 34984

Title            VP  
Name            SCOTT, TANNER  
Address        1600 NE 24 TERRACE  
City-State-Zip: JENSEN BEACH FL 34957

*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:** ANDREA COHEN

TREASURE

07/18/2020

Electronic Signature of Signing Officer/Director Detail

Date