above, or on an attachment with all other like empowered.

SIGNATURE: KRISTIN FINGER

Electronic Signature of Signing Officer/Director Detail

Entity Name: OCOEE LITTLE LEAGUE, INC.

Current Principal Place of Business:

570 FLEWELLING AVE OCOEE, FL 34761

DOCUMENT# 757873

Current Mailing Address:

P.O. BOX 266 OCOEE. FL 34761

FEI Number: 52-1234561

Name and Address of Current Registered Agent:

Electronic Signature of Registered Agent

OLIVER, HARVEY G 10078 CLARCONA-OCOEE RD APOPKA, FL 32703 US

Officer/Director Detail :

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:

Title	P	Title	V
Name	OLIVER, HARVEY G	Name	HERRING, ALLEN
Address	10078 CLARCONA-OCOEE RD	Address	1006 KIMBALL DR
City-State-Zip:	APOPKA FL 32703	City-State-Zip:	OCOEE FL 34761
Title	т		
Title Name	T FINGER, KRISTIN		
	T FINGER, KRISTIN 1874 RUSHDEN DR		

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

TREASURER

Certificate of Status Desired: Yes

FILED Apr 29, 2013 Secretary of State CC5236818974

Date

04/29/2013

2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

City-State-Zip: OCOEE FL 34761

Date