

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 763180

**Entity Name:** ST. AUGUSTINE LITTLE LEAGUE, INC.

**Current Principal Place of Business:**

100 WALER WAY  
ST. AUGUSTINE, FL 32086

**Current Mailing Address:**

P.O. BOX 305  
ST. AUGUSTINE, FL 32085

**FEI Number: 52-1287648**

**Certificate of Status Desired: No**

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

WALER, RICHARD L III  
100 WALER WAY  
ST AUGUSTINE, FL 32086 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:** RICHARD WALER III

01/10/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DV  
Name MARTIN, MARTY  
Address 237 MONTEREY AVE  
City-State-Zip: SAINT AUGUSTINE FL 32084

Title D, VP  
Name WALER, RICHARD L JR.  
Address 100 WALER WAY  
City-State-Zip: ST. AUGUSTINE FL 32086

Title DIRECTOR  
Name TIM, DURAND  
Address 2995 STRATTON BLVD  
City-State-Zip: ST. AUGUSTINE FL 32084

Title TREASURER, SECRETARY,  
DIRECTOR  
Name WALER , RICHARD L III  
Address 232 BONITA ROAD  
City-State-Zip: ST. AUGUSTINE FL 32086

Title PRESIDENT  
Name DURAND, TIM  
Address P.O. BOX 305  
City-State-Zip: ST. AUGUSTINE FL 32085

Title VP, DIRECTOR  
Name NAPIER, JON  
Address P.O. BOX 305  
City-State-Zip: ST. AUGUSTINE FL 32085

Title VP, DIRECTOR  
Name RANICK, JEN  
Address P.O. BOX 305  
City-State-Zip: ST. AUGUSTINE FL 32085

Title DIRECTOR  
Name WELU, JAMIE  
Address P.O. BOX 305  
City-State-Zip: ST. AUGUSTINE FL 32085

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*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:** MARTY MARTIN

PRESIDENT

01/10/2017

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title VP  
Name KILLIN, LARISSA  
Address P.O. BOX 305  
City-State-Zip: ST. AUGUSTINE FL 32085

Title VP  
Name HAYES, KEVIN  
Address P.O. BOX 305  
City-State-Zip: ST. AUGUSTINE FL 32085

Title VP  
Name STOWE, MATT  
Address P.O. BOX 305  
City-State-Zip: ST. AUGUSTINE FL 32085

Title VP  
Name CHURCH, DAMEON  
Address P.O. BOX 305  
City-State-Zip: ST. AUGUSTINE FL 32085

Title VP  
Name POORE, NICOLE  
Address P.O. BOX 305  
City-State-Zip: ST. AUGUSTINE FL 32085