2019 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 02/08/2019

Electronic Signature of Registered Agent

Date

FILED Feb 08, 2019

Secretary of State

8312587685CC

Officer/Director Detail:

Title DV Title D, T, O

Name MARTIN, MARTY Name WALER, RICHARD L JR.

Address 237 MONTEREY AVE Address 100 WALER WAY

City-State-Zip: SAINT AUGUSTINE FL 32084 City-State-Zip: ST. AUGUSTINE FL 32086

Title D, P Title SECRETARY, DIRECTOR

Name TIM, DURAND Name WALER , RICHARD L III

Address 2995 STRATTON BLVD Address 232 BONITA ROAD

City-State-Zip: ST. AUGUSTINE FL 32084 City-State-Zip: ST. AUGUSTINE FL 32086

Title VP, D Title D, VP

Name ABARE, BILL III Name LETH, LAUREN
Address P.O. BOX 305 Address P.O. BOX 305

City-State-Zip: ST. AUGUSTINE FL 32085 City-State-Zip: ST. AUGUSTINE FL 32085

Title VP, D Title VP

Name SCHIRALDI, JOSEPH Name EATON, JOHN Address P.O. BOX 305 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: RICHARD L WALER JR TREASURER 02/08/2019

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued:

Title VP, D Title D, OTHER

Name MAURER, CATHERINE L Name TAYLOR, WADE

Address P.O. BOX 305 Address P O BOX 305

City-State-Zip: ST. AUGUSTINE FL 32085 City-State-Zip: ST AUGUSTINE FL 32085

Title VP Title ASST. SECRETARY

Name GRUESER, JERRY Name DURAND, DARLA

Address P O BOX 305 Address 2995 STRATTON BLVD

City-State-Zip: ST AUGUSTINE FL 32085 City-State-Zip: ST AUGUSTINE FL 32084