

2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000339

Entity Name: LAFAYETTE BABE RUTH, INC.**Current Principal Place of Business:**NE COUNTY ROAD 400
EDWARD PERRY SPORTS COMPLEX
MAYO, FL 32066**Current Mailing Address:**PO BOX 862
MAYO, FL 32066 US**FEI Number:** 20-4146931**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**LAND, KATYJO
1179 NORTHWEST COUNTY ROAD 290
MAYO, FL 32066 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:** KATYJO LAND

02/02/2024

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

| | |
|-----------------|-----------------------------------|
| Title | TREASUER |
| Name | LAND, KATYJO |
| Address | 1179 NORTHWEST COUNTY ROAD 290 |
| City-State-Zip: | MAYO FL 32066 |

| | |
|-----------------|---------------|
| Title | PRESIDENT |
| Name | PERRY, LEVI |
| Address | P.O. BOX 862 |
| City-State-Zip: | MAYO FL 32066 |

| | |
|-----------------|---------------|
| Title | VP |
| Name | LAMB, AMANDA |
| Address | P.O. BOX 862 |
| City-State-Zip: | MAYO FL 32066 |

| | |
|-----------------|---------------|
| Title | SECRETARY |
| Name | MILLER, HOLLY |
| Address | P.O. BOX 862 |
| City-State-Zip: | MAYO FL 32066 |

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: KATYJO LAND

TREASURER

02/02/2024

Electronic Signature of Signing Officer/Director Detail

Date