

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N28444

**Entity Name:** ST. LUCIE COUNTY YOUTH BASEBALL, INC.

**Current Principal Place of Business:**

2503 DELAWARE AVE  
FORT PIERCE, FL 34947

**Current Mailing Address:**

PO BOX 13322  
FORT PIERCE, FL 34979 US

**FEI Number: 65-0081390**

**Certificate of Status Desired: No**

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

TALLEY, WILLIAM DJR  
2503 DELAWARE AVE  
FORT PIERCE, FL 34947 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title P  
Name LAMB, ROBERT  
Address PO BOX 13322  
City-State-Zip: FORT PIERCE FL 34979

Title VP  
Name GUDGER, JODY  
Address PO BOX 13322  
City-State-Zip: FORT PIERCE FL 34979

Title S  
Name LEE, TIFFANY  
Address PO BOX 13322  
City-State-Zip: FORT PIERCE FL 34979

Title T  
Name TALLEY, WILLIAM DJR  
Address PO BOX 13322  
City-State-Zip: FORT PIERCE FL 34979

Title D  
Name PALLAS, CHRIS  
Address PO BOX 13322  
City-State-Zip: FT. PIERCE FL 34979

Title D  
Name SOUTHWICK, SABRINA  
Address PO BOX 13322  
City-State-Zip: FORT PIERCE FL 34979

*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: WILLIAM TALLEY**

**TREASURER**

**03/22/2013**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date