# 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.

TREASURER

#### SIGNATURE: KELLY FOX

Electronic Signature of Signing Officer/Director Detail

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

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

PETERSON, CARL 2503 DELAWARE AVE FORT PIERCE, FL 34947 US FILED Jan 31, 2018 Secretary of State CC3304588096

Certificate of Status Desired: No

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	CARL PETERSON			01/31/2018
	Electronic Signature of Registered Agent			Date
Officer/Director Detail :				
Title	PRESIDENT	Title	SECRETARY	
Name	PETERSON, CARL	Name	COGGINS, TRACY	
Address	PO BOX 13322	Address	PO BOX 13322	
City-State-Zip:	FORT PIERCE FL 34979	City-State-Zip:	FT. PIERCE FL 34979	
Title	VP	Title	TREASURER	
Name	DANIELS, PAUL	Name	FOX, KELLY	
Address	PO BOX 13322	Address	PO BOX 13322	
City-State-Zip:	FORT PIERCE FL 34979	City-State-Zip:	FORT PIERCE FL 34979	
Title	CONCESSION			
Name	DANIELS, KATIE			
Address	PO BOX 13322			
City-State-Zip:	FORT PIERCE FL 34979			

01/31/2018

Date