

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 700675

FILED  
Aug 31, 2006  
Secretary of State

Entity Name: MEADOWLAWN LITTLE LEAGUE INC

## Current Principal Place of Business:

7390 18TH ST N.  
PO BOX 20644  
ST. PETE, FL 33742 US

## New Principal Place of Business:

## Current Mailing Address:

7390 18TH STREET N  
P O BOX 20644  
ST PETERSBURG FLA, 33742 US

## New Mailing Address:

PO BOX 20644  
ST PETERSBURG, FL 33742 US

FEI Number: 23-7061591 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

## Name and Address of Current Registered Agent:

CARSON, THOMAS H  
8414-17TH STREET NORTH  
SAINT PETERSBURG, FL 33702 US

## Name and Address of New Registered Agent:

ROBERT, HUFF J  
5733 MAGNOLIA STREET NORTH  
SAINT PETERSBURG, FL 33703 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: ROBERT J HUFF

08/31/2006

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: HUFF, ROBERT J  
Address: 5733 MAGNOLIA ST N  
City-St-Zip: SAINT PETERSBURG, FL 33703

Title: D ( ) Delete  
Name: HOLEY, RICHARD JR  
Address: 854 118TH TERRACE N, # 8  
City-St-Zip: SAINT PETERSBURG, FL 33716

Title: D (X) Delete  
Name: WILTSE, CRAIG  
Address: 1572 77TH AVE NORTH  
City-St-Zip: SAINT PETERSBURG, FL 33702

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: O (X) Change ( ) Addition  
Name: SEAMAN, ADELE H  
Address: 6705 MOUNT PLEASANT ROAD NE  
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: O (X) Change ( ) Addition  
Name: HALEY, RICHARD JR  
Address: 854 118TH TERRACE N, # 8  
City-St-Zip: SAINT PETERSBURG, FL 33716

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: ADELE H SEAMAN

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08/31/2006

Electronic Signature of Signing Officer or Director

Date