2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 702201

FILED Feb 06, 2008 Secretary of State

Entity Name: PINECASTLE AREA LITTLE LEAGUE INC

Current Principal Place of Business: New Principal Place of Business:

814 W. OAK RIDGE RD. ORLANDO, FL 32809

Current Mailing Address: New Mailing Address:

P.O. BOX 593425 ORLANDO, FL 328593425

FEI Number: 59-1865469 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

FLICK, JAMES J FLICK, JAMES J

112 LAKE AVENUE 3203 S, CONWAY ROAD ORLANDO, FL 32801 US SUITE 106 ORLANDO, FL 32812 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: JAMES J. FLICK 02/06/2008

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change () Addition MIKULSKI, DAVID MIKULSKI, DAVID Name: Name: 409 MONROE PLACE Address: 409 MONROE PARK Address: City-St-Zip: PORT ORANGE, FL 32127 City-St-Zip: PORT ORANGE, FL 32127 Title: PD () Delete Title: () Change () Addition AMODEO, MARGARET Name: Name: Address: 1311 HOFFNER AVENUE Address: City-St-Zip: ORLANDO, FL 32809 City-St-Zip: Title: () Delete Title: () Change () Addition MILOTTE, DEBORAH Name: Name: Address: 3067 BELLINGHAM DR. Address: City-St-Zip: ORLANDO, FL 32825 City-St-Zip: Title: VPD () Delete Title: ΤD (X) Change () Addition Name: LOPEZ, RAPHAEL Name: LOPEZ, RAPHAEL 4259 INGLENOOK LANE Address: Address: 4259 INGLENOOK LANE

City-St-Zip: ORLANDO, FL 32838 City-St-Zip: ORLANDO, FL 32838

Title: () Delete Title: () Change () Addition

AMODEO, FRANK Name: Name: 1311 HOFFNER AVENUE Address: Address: City-St-Zip: ORLANDO, FL 32809 City-St-Zip:

Title: () Delete Title: () Change (X) Addition

AMODEO, LOUIS Name: Name: Address: Address: 1311 HOFFNER AVENUE ORLANDO, FL 32809 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: FRANK AMODEO D 02/06/2008