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May 06 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 702459 (9)

1. Corporation Name

LAKE WORTH YOUTH BASEBALL LEAGUES INC



Principal Place of Business

900 NORTH 22ND AVE
LAKE WORTH FL 33460

Mailing Address

900 NORTH 22ND AVE
LAKE WORTH FL 33460-6175

3. Date Incorporated or Qualified
05/02/1961

3a. Date of Last Report
04/30/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number

23-7134303

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes



Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CONNER, ELLEN
515 20TH AVE N
LAKE WORTH FL 33460

81 Name ROY STROHACKER

82 Street Address (P.O. Box Number is Not Acceptable)
1111 CRESTWOOD BLVD.

83

84 City LAKE WORTH

FL

85 Zip Code 33460

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0508, Florida Statutes.

SIGNATURE ROY STROHACKER - Roy Strohacker

4-17-97

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☒ DELETE

NAME CONNER, ELLEN
STREET ADDRESS 515 20TH AVE N
CITY-ST-ZIP LAKE WORTH FL

TITLE SD ☒ DELETE

NAME CONNER, ELLEN
STREET ADDRESS 515 20TH AVE N
CITY-ST-ZIP LAKE WORTH FL

TITLE TD ☐ DELETE

NAME ILEANA MILIAN
STREET ADDRESS 5281 ROBBIE COURT
CITY-ST-ZIP WEST PALM BEACH FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

PD

ROY STROHACKER
1111 CRESTWOOD BLVD.
LAKE WORTH, FL. 33460

SD

RARUEL PEREZ
879 RUTHERFORD LANE
WEST PALM BEACH, FL. 33415

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

4-17-97 (561) 588-11143

CR2E037 (9/96)