


2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT # 702459		
1. Entity Name LAKE WORTH YOUTH BASEBALL LEAGUES INC		

Principal Place of Business 900 22ND AVE NORTH LAKE WORTH, FL 33460	Mailing Address 900 22ND AVE NORTH LAKE WORTH, FL 33460
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 MAY 31 AM 8:50



05262005 Chg-NP CR2E037 (10/03)

4. FEI Number 23-7134303	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent LOWER, JEFF 506 ELIZABETH ROAD LAKE WORTH, FL 33461		7. Name and Address of New Registered Agent Name Kenneth DiMaso Street Address (P.O. Box Number is Not Acceptable) 7859 Ridgewood Drive City Lake Worth FL Zip Code 33467	
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8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE **Kenneth DiMaso President** DATE **5/26/05**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Amended AR is \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DE LA PENA, ORLANDO 1735 17TH NORTH LAKE WORTH, FL 33460 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Jennifer A Martinez <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 5222 canoe Bend Drive LAKE WORTH FL 33463
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LOWER, JEFF 506 ELIZABETH ROAD LAKE WORTH, FL 33461 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP Paula DiMaso <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 7859 Ridgewood Dr LAKE WORTH FL 33467
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S FOREST, GINA 1768 15TH AVE N LAKE WORTH, FL 33460 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CL/M Gary Bishop <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 888 Gazetteta way West Palm Beach FL 33413
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LOWER, MARIE 506 ELIZABETH ROAD LAKE WORTH, FL 33461 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Robyn Walker <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4618 Rainwood Cove Lane LAKE WORTH FL 33463
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: **Jennifer A Martinez** DATE **5/26/05** **561-9658050**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR