## 2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED Nov 01, 2006 **DOCUMENT# 702625** Secretary of State

Entity Name: INDIAN RIVER CITY LITTLE LEAGUE, INC.

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

W.W. JAMES FIELD 300 LITTLE LEAGUE LANE TITUSVILLE, FL 32780

**New Mailing Address: Current Mailing Address:** 

P.O. BOX 5417 TITUSVILLE, FL 327835417

FEI Number: 52-1344876 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

RICHARDSON, SHELDEN J TD MCCAIN, RAYFORD F TD 1425 HARDY ST. 4355 WESTLAKE DRIVE TITUSVILLE, FL 32780 US TITUSVILLE, FL 32780

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: RAYFORD F. MCCAIN 11/01/2006

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PDD (X) Change ( ) Addition () Delete MORRISON, ROYCE S PDD TARR, BURTON C PDD Name: Name:

3412 SOUTH PARK AVE. Address: 3425 BARNA AVENUE Address: City-St-Zip: TITUSVILLE, FL 32780 City-St-Zip: TITUSVILLE, FL 32780

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

RICHARDSON, FELECIA L SD Name: Name: MUDRAK, KRISTINA SD Address: 1425 HARDY ST. Address: 4400 ROSEHILL AVENUE City-St-Zip: TITUSVILLE, FL 32780 City-St-Zip: TITUSVILLE, FL 32780

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

RICHARDSON, SHELDEN J TD MCCAIN, RAYFORD F TD Name: Name: 4355 WESTLAKE DRIVE Address: 1425 HARDY ST Address: City-St-Zip: TITUSVILLE, FL 32780 City-St-Zip: TITUSVILLE, FL 32780

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

Name: TARR, BARTON C VPD Name: STOVER, BILLY R VPD 3425 BARNA AVE. 3840 OAKHILL DRIVE Address: Address: City-St-Zip: TITUSVILLE, FL 32780 City-St-Zip: TITUSVILLE, FL 32780

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: RAYFORD F. MCCAIN TD 11/01/2006