

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 09, 2004 8:00 am**  
**Secretary of State**

02-09-2004 90051 030 \*\*\*\*61.25

**DOCUMENT # 704321**

1. Entity Name

AVON PARK BASEBALL, INC.



Principal Place of Business

P.O. BOX 1907  
AVON PARK FL 33826  
US

Mailing Address

P.O. BOX 1907  
AVON PARK FL 33825

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2178371

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required



MOORE

CR2E037 (11/03)

6. Name and Address of Current Registered Agent

DAVIS, LISA C.  
85 HILLCREST DR  
AVON PARK FL 33825

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE DVP  
NAME DUKE, MAX ☒ Delete  
STREET ADDRESS 1010 WEST MAIN ST  
CITY-ST-ZIP AVON PARK FL 33825

TITLE DS  
NAME BARNES, KELLY P ☐ Delete  
STREET ADDRESS 2301 N. UERRIER RD  
CITY-ST-ZIP AVON PARK FL 33825

TITLE DT  
NAME WRIGHT, TRISHA ☒ Delete  
STREET ADDRESS 970 LAKE LOTELA DR  
CITY-ST-ZIP AVON PARK FL 33825

TITLE DP  
NAME DEVLIN, TIM ☒ Delete  
STREET ADDRESS 321 TULANE CIR ST  
CITY-ST-ZIP AVON PARK FL 33825

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE DVP ☐ Change ☒ Addition  
NAME marley, David  
STREET ADDRESS 3212 W. Hartman Rd  
CITY-ST-ZIP Avon park, FL 33825

TITLE DS ☒ Change ☐ Addition  
NAME Barnes, Kelly P  
STREET ADDRESS 2301 N. UERRIER RD  
CITY-ST-ZIP Avon park, FL 33825

TITLE DT ☐ Change ☒ Addition  
NAME Stoll, Laurie  
STREET ADDRESS 1038 E. Cornell St  
CITY-ST-ZIP Avon park, FL 33825

TITLE DP ☐ Change ☒ Addition  
NAME mcIntyre, Kevin  
STREET ADDRESS 24 Forest Hill Ct  
CITY-ST-ZIP Avon park, FL 33825

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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:

*Kelly P. Barnes* Secretary  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/3/04  
Date

(863) 402-1888  
Daytime Phone #