2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704321

FILED Mar 21, 2006 Secretary of State

Entity Name: AVON PARK BASEBALL, INC.

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

P.O. BOX 1907

AVON PARK, FL 33826 US

Current Mailing Address: New Mailing Address:

P.O. BOX 1907 AVON PARK, FL 33826

FEI Number: 59-2178371 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:

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

Name:

Electronic Signature of Registered Agent

Date

(X) Change () Addition

OFFICERS AND DIRECTORS:

() Delete

DVP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

ODHAM, RUSSELL Name: BEERS, JON 1500 N. ANOKA AVENUE Address: 2936 N. CAMBRIDGE ROAD

 Address:
 1500 N. ANOKA AVENUE
 Address:
 2936 N. CAMBRIDGE ROAD

 City-St-Zip:
 AVON PARK, FL 33825
 City-St-Zip:
 AVON PARK, FL 33825

Title: DS () Delete Title: DS (X) Change () Addition Name: BARNES, KELLY P Name: WASHINGTON, RAMONA

 Address:
 2301 N. UERRIER RD
 Address:
 2063 N. SAGINAW ROAD

 City-St-Zip:
 AVON PARK, FL 33825
 City-St-Zip:
 AVON PARK, FL 33825

 Name:
 STOLL, LAURIE
 Name:
 STOLL, LAURIE

 Address:
 1038 E CORNELL ST
 Address:
 712 E CORNELL STREET

City-St-Zip: AVON PARK, FL 33825 City-St-Zip: AVON PARK, FL 33825

 $\label{eq:title:DP} \textit{Title:} \qquad \textit{DP} \qquad \textit{()} \; \textit{Delete} \qquad \qquad \textit{Title:} \qquad \textit{DP} \qquad \textit{(X)} \; \textit{Change ()} \; \textit{Addition}$

 Name:
 MCINTYRE, KÉVIN
 Name:
 MARLEY, DAVÍD

 Address:
 24 FOREST HILL CT
 Address:
 2212 HARTMAN ROAD

 City-St-Zip:
 AVON PARK, FL 33825
 City-St-Zip:
 AVON PARK, FL 33825

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: LAURIE STOLL DT 03/21/2006