

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 704752

FILED
May 15, 2004
Secretary of State**Entity Name:** NORTHWEST LITTLE LEAGUE INC**Current Principal Place of Business:**6701 - 40 AVENUE NORTH
ST PETERSBURG, FL 33709 US**New Principal Place of Business:****Current Mailing Address:**3160 61 LANE NORTH
ST PETERSBURG, FL 33710 US**New Mailing Address:****FEI Number:** 59-6495395**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**POUNDERS, MICHAEL A PRES.
5296 53RD STREET NORTH
ST PETERSBURG, FL 33709 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: POUNDERS, MICHAEL
Address: 5296 53 ST. N.
City-St-Zip: SAINT PETERSBURG, FL 33709

Title: D () Delete
Name: MASI, DAN,
Address: 3160 61ST LANE, NORTH
City-St-Zip: ST PETERSBURG, FL

Title: D () Delete
Name: MCCULLOUGH, MIKE
Address: 3325 - 68TH ST., N.
City-St-Zip: ST. PETERSBURG, FL

Title: TD () Delete
Name: MASI, MARY KAY
Address: 3160 61 LANE NORTH
City-St-Zip: ST PETERSBURG, FL

Title: D () Delete
Name: WITZMAN, JOAN,
Address: 6142-47 AVE N
City-St-Zip: ST PETERSBURG, FL

Title: D () Delete
Name: RUSS, DENNIS,
Address: 3420-71 ST N.
City-St-Zip: ST PETERSBURG, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MARY KAY MASI

TRE

05/15/2004

Electronic Signature of Signing Officer or Director

Date