

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706213

FILED
Jul 15, 2005
Secretary of State

Entity Name: VENICE LITTLE LEAGUE, INC.

Current Principal Place of Business:

P.O. BOX 2154
VENICE, FL 342842154 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 2154
VENICE, FL 342842154 US

New Mailing Address:

FEI Number: 23-7400963 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

IORIO, DIANE
322 GAUGIN DR
OSPREY, FL 34229 US

Name and Address of New Registered Agent:

IORIO, DIANE
417 MURILLO DRIVE
NOKOMIS, FL 34275 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: DIANE IORIO

07/15/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: HITT, JAMES
Address: 215 GLEN OAK RD
City-St-Zip: VENICE, FL 34293

Title: TD () Delete
Name: IORIO, DIANE
Address: 322 GAUGIN DR
City-St-Zip: OSPREY, FL 34229

Title: S () Delete
Name: KRAUSS, SHELLY
Address: 125 PADDINGTON RD
City-St-Zip: VENICE, FL 34293

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MORSE, DAVID
Address: 515 BAYSHORE RD.
City-St-Zip: OSPREY, FL 34229

Title: TREA (X) Change () Addition
Name: IORIO, DIANE
Address: 322 GAUGIN DR
City-St-Zip: OSPREY, FL 34229

Title: SEC (X) Change () Addition
Name: KRAUSS, SHELLY
Address: 125 PADDINGTON RD
City-St-Zip: VENICE, FL 34293

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: DIANE IORIO

TREA

07/15/2005

Electronic Signature of Signing Officer or Director

Date