

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 706992

FILED
Dec 13, 2006
Secretary of State

Entity Name: SEMINOLE BASEBALL, INC.

Current Principal Place of Business:

1420 SR 419
WINTER SPRINGS, FL 32708

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 180662
CASSELBERRY, FL 32718

New Mailing Address:

627 ESTATES PLACE
LONGWOOD, FL 32779

FEI Number: 59-2721180 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:

ROY, DAVE
145 E TRADMINDS RD
WINTER SPRINGS, FL 32702 US

Name and Address of New Registered Agent:

SILER, LEE
627 ESTATES PLACE
LONGWOOD, FL 32779 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: LEE A. SILER

12/13/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROY, DAVE
Address: 1451 E. TRADEWINDS RD.
City-St-Zip: WINTER SPRINGS, FL 32708

Title: VPD () Delete
Name: LAWRENCE, JAMES
Address: 1393 LA PALOMA CIR
City-St-Zip: WINTER SPRINGS, FL 32708

Title: S (X) Delete
Name: BARTH, JAMES
Address: 1214 SONGGROVE TREE BLVD
City-St-Zip: LONGWOOD, FL 32779

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SILER, LEE
Address: 627 ESTATES PLACE
City-St-Zip: LONGWOOD, FL 32779

Title: VPD (X) Change () Addition
Name: BARTH, JAMES
Address: 1214 SUNSHINE TREE BLVD
City-St-Zip: LONGWOOD, FL 32779

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 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: LEE A. SILER

PD

12/13/2006

Electronic Signature of Signing Officer or Director

Date