

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED

96 SEP 17 AM 11:05

DOCUMENT # 707370 (3)

1. Corporation Name

NORTH MERRITT ISLAND LITTLE LEAGUE, INC.

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



Principal Place of Business  
305 N COURTENAY PKWY  
P.O. BOX 540394  
MERRITT ISLAND FL 32953  
US

Mailing Address  
P.O. BOX 394  
P.O. BOX 540394  
MERRITT ISLAND FL 32953  
US

3. Date Incorporated or Qualified 06/02/1964  
3a. Date of Last Report 05/01/1995  
4. FEI Number APPLIED FOR  
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip  
24 Country  
25  
26  
27  
28  
29  
30

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip  
29 Country  
30

9. Name and Address of Current Registered Agent  
PAPCZYNSKI, TERRY  
100 E CRISAFULLI RD  
MERRITT ISLAND FL 32953

10. Name and Address of New Registered Agent  
81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS  
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP
PD	WAYNE, MARTIN	413 4TH ST	MERRITT ISLAND FL				
VD	JONES, LORA	445 MOHAWK TRAIL	MERRITT ISLAND FL				
TD	EFSTATHIO, KAREN	475 CARRIOCA CT	MERRITT ISLAND, FL 00000				
TD	LYLE, JOANN	715 RIVERS OAK LANE	MERRITT ISLAND, FL 00000				
D	SHERIDAN, TIM	715 E CRISAFULLI RD	MERRITT ISLAND, FL 00000				

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\*\*\*\*\*61.25 \*\*\*\*\*61.25

V VINCE Ferrando  
840 Koloa DR.  
Merritt Island, FL. 32953

S CANDY Puls  
210 MAUREEN AVE.  
Merritt Island, FL. 32953

T LORA JONES  
445 MOHAWK TRAIL  
Merritt Island, FL. 32953

D KIM LAWSON  
340 MARSEILLE DRIVE  
Merritt Island, FL. 32953

JB 9-27-96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Wayne Martin July 30, 1996 407-453-0019  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
WAYNE MARTIN  
0005187