

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 709367

FILED  
Jan 21, 2009  
Secretary of State

Entity Name: PORT CHARLOTTE LITTLE LEAGUE INC

**Current Principal Place of Business:**

23400 HAROLD AVENUE  
PORT CHARLOTTE, FL 33952 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 495541  
PORT CHARLOTTE, FL 339495541 US

**New Mailing Address:**

21247 COTTONWOOD AVE  
PORT CHARLOTTE, FL 33952 US

FEI Number: 52-1286858

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SIMPSON, RICHARD  
540 GROVE AVENUE  
PORT CHARLOTTE, FL 33952 US

**Name and Address of New Registered Agent:**

BILL, COLUMBIA  
23293 MULLIGAN AVE  
PORT CHARLOTTE, FL 33954 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: BILL COLUMBIA

01/21/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: AGOSTO, LOUIS  
Address: 21247 COTTONWOOD AVENUE  
City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: VPD ( ) Delete  
Name: SMARJESSE, CHRIS  
Address: 246 ORLANDO BLVD  
City-St-Zip: PORT CHARLOTTE, FL 33954 US

Title: SD ( ) Delete  
Name: MOSS-SOLOMON, CATHERINE  
Address: 23369 MCQUEENEY AVENUE  
City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: TD ( ) Delete  
Name: HEITMAN, EUGENE R  
Address: 12687 SW COUNTY RD 769 #2A  
City-St-Zip: PORT CHARLOTTE, FL 34269 US

Title: VD (X) Delete  
Name: BURKE, KEVIN  
Address: 23119 LANGDON AVENUE  
City-St-Zip: PORT CHARLOTTE, FL 33954 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VPD (X) Change ( ) Addition  
Name: COLUMBIA, BILL  
Address: 23293 MULLIGAN AVE  
City-St-Zip: PORT CHARLOTTE, FL 33954 US

Title: SD (X) Change ( ) Addition  
Name: RANSON, KATIE  
Address: 22325 PEACHLAND BLVD  
City-St-Zip: PORT CHARLOTTE, FL 33954 US

Title: ( ) Change ( ) Addition  
Name:  
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 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: KATIE RANSON

SD

01/21/2009

Electronic Signature of Signing Officer or Director

Date