2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 16, 2003 8:00 am
Secretary of State
01-16-2003 90099 002 ****61.25

DOCUMENT # 710282

1. Entity Name
CONWAY LITTLE LEAGUE, INC.

Principal Place of Business	Mailing Address
4400 KENNEDY AVENUE ORLANDO FL 32812 US	P.O. BOX 561253 ORLANDO FL 32856

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 23-7396676 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

WATWOOD, ANGIE
2709 GLENDORA AVENUE
ORLANDO FL 32812

7. Name and Address of New Registered Agent

Name: KIM A. DAVIES
Street Address (P.O. Box Number is Not Acceptable): 8127 LIANNA DR.
City: ORLANDO **FL** Zip Code: 32822

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Kim A Davies KIM A. DAVIES 1/11/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD WATWOOD, ANGIE 2709 GLENDORA AVE ORLANDO FL 32812	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD CARLA BARROWS 2134 MONASTERY CIR. ORLANDO, FL 32822 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD WILLIAMS, SCOTT 5013 DENIS COURT ORLANDO FL 32912	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BLAKE, KATHY 4131 ORTISI DRIVE ORLANDO FL 32822	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LISA BAILEY 4040 TERIWOOD AVE. ORLANDO, FL 32812 — ☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DAVIES, KIM 8127 LIANNA DRIVE ORLANDO FL 32822	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (10/02)

12. I hereby certify that the information supplied with this filing does not qualify 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kim A Davies REQUIRED KIM A. DAVIES 1/11/03 4073996783
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Telephone Number