

# 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 711062

FILED  
Jan 08, 2007  
Secretary of State

Entity Name: INTERBAY LITTLE LEAGUE, INC.

## Current Principal Place of Business:

6904 MACDILL AVE  
TAMPA, FL 33611 US

## New Principal Place of Business:

6901 MACDILL AVE  
TAMPA, FL 33611 US

## Current Mailing Address:

P.O. BOX 13915  
TAMPA, FL 33681 US

## New Mailing Address:

4207 S DALE MABRY HIGHWAY  
#11307  
TAMPA, FL 33611 US

FEI Number: 52-1234532

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ZUSPAN, ALICIA R  
5633 GASPAR OAKS DRIVE  
TAMPA, FL 33611 US

## Name and Address of New Registered Agent:

ROBERTS, ALICIA A  
4207 S. DALE MABRY HIGHWAY  
#11307  
TAMPA, FL 33611 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: ALICIA A ROBERTS

01/08/2007

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: ZUSPAN, JOSHUA  
Address: 5633 GASPAR OAKS DRIVE  
City-St-Zip: TAMPA, FL 33611 US

Title: VP ( ) Delete  
Name: LEATH, WILLIAM  
Address: 4108 TREASURE CIRCLE  
City-St-Zip: TAMPA, FL 33616 US

Title: S (X) Delete  
Name: RANKIN, DEBORAH  
Address: 4434 WEST PINTOR PLACE  
City-St-Zip: TAMPA, FL 33616 US

Title: T ( ) Delete  
Name: ZUSPAN, ALICIA R  
Address: 5633 GASPAR OAKS DRIVE  
City-St-Zip: TAMPA, FL 33611 US

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: WOODLEE, JAMIE  
Address: 3140 WEST VARN AVENUE  
City-St-Zip: TAMPA, FL 33611 US

Title: VP (X) Change ( ) Addition  
Name: WILLIAMS, AVA  
Address: 6901 MACDILL AVENUE  
City-St-Zip: TAMPA, FL 33611 US

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

Title: T (X) Change ( ) Addition  
Name: ROBERTS, ALICIA A  
Address: 4207 S DALE MABRY HIGHWAY #11307  
City-St-Zip: TAMPA, FL 33611 US

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: ALICIA A ROBERTS

T

01/08/2007

Electronic Signature of Signing Officer or Director

Date