## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT # 717069** 

(9)

THE FLORIDA STATE LEAGUE OF PROFESSIONAL BASEBAL L CLUBS, INC.

Principal Place of Business Mailing Address 103 E. ORANGE AVE. 103 E. ORANGE AVE. P.O. BOX 349 P.O. BOX 349 DAYTONA BEACH FL 32115-0349 DAYTONA BEACH FL 32115 3a. Date of Last Report 02/12/1996 Date Incorporated or Qualified 08/27/1969 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 59-0248215 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country This corporation has liability for Intangible tax under s. 199.032, Yes X No 24 29 30 Florida Statutes 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name MURPHY, CHARLES K Street Address (P.O. Box Number is Not Acceptable) 103 E. ORANGE AVE. 83 DAYTONA BEACH FL 32115 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 Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12 13. DELETE Change Addition 1.1 TITLE TITLE PTC MURPHY, CHARLES K NAME 1.2 NAME 103 E. ORANGE AVE STREET ADDRESS 1.3 STREET ADDRESS DAYTONA BEACH FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 2.1 TITLE CARSON, KEN NAME 2.2 NAME 103 E. ORANGE AVE. 2.3 STREET ADDRESS STREET ADDRESS DAYTONA BEACH FL 2. 4 CITY-ST-ZIP CHTY-ST-ZIP DELETE ☐ Change Addition 3.1 TITLE TITLE MONACO, DAVID A 3.2 NAME NAME 103 E. ORANGE AVE. 3.3 STREET ADDRESS STREET ADDRESS DAYTONA BEACH FL 3.4. CITY-ST-ZIP CITY-ST-ZIP X DELETE Change Addition 4.1 TITLE TITLE -RABENECKER, -ROB NAME 4.2 NAME <del>-103-E. Orange ave</del> STREET ADDRESS 4.3 STREET ADDRESS -Daytona Beach Fl-4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change X Addition 5.1 TITLE TITLE VD NAME 5.2 NAME TOM SIMMONS STREET ADDRESS **5.3 STREET ADDRESS** 103 E ORANGE AVE 5.4 CITY-ST-ZIP CITY-ST-ZIP DAYTONA BEACH FL DELETE Addition 6.1 TITLE TITLE NAME 6.2 NAME

**6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), 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.

STREET ADDRESS

SIGNATURE AND TYPED ON PRINTED NAME OF BIODING OFFICER OR DIRECTOR

1-31-97

Daytime Phone #0002067

**FILED** 

Feb 14 1997 8:00am

Secretary of State