2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#720814

FILED Jaņ 03, 2<u>00</u>6 Secretary of State

Entity Name: ARLINGTON LITTLE LEAGUE, INC.

Current Principal Place of Business: New Principal Place of Business: 6350 FT CAROLINE RD PO BOX 8223 JACKSONVILLE, FL 32277 **New Mailing Address: Current Mailing Address:** PO BOX 8223 JACKSONVILLE, FL 32239 FEI Number: 59-6611088 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: DOYLE, WILLIAM E 2002 SOUTHSIDE BLVD STE 201 JACKSONVILLE, FL 32216 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete BRANTLY, DAVID DEWOLF, ANSON Name: Name: 1340 RIVER HILLS CIR. E. Address: 3980 HEIDI RD. W. Address: City-St-Zip: JACKSONVILLE, FL 32211 City-St-Zip: JACKSONVILLE, FL 32277 Title: VD Title: VD (X) Change () Addition () Delete DEWOLF, ANSON Name: LARRY, WEAVER Name: Address: 3980 HEIDI RD. W. Address: 992 PARKRIDGE CIRCLE W. City-St-Zip: JACKSONVILLE, FL 32277 City-St-Zip: JACKSONVILLE, FL 32211 Title: () Delete Title: () Change () Addition

City-St-Zip:

Name:

Address:

TD

Title: MCCUTCHEON II, GENE

Name: 8118 PARKRIDGE CIRCLE N. Address:

City-St-Zip: JACKSONVILLE, FL 32211 Title:

Name: Address: City-St-Zip:

() Delete

6101 RAIN FREE ROAD

JACKSONVILLE, FL 32277

() Delete

OGIN, LAURA

BUSH, RONALD 2520 WEDGEFIELD BLVD JACKSONVILLE, FL 32211 Title:

Name:

Title:

Name:

Address:

City-St-Zip:

Address:

City-St-Zip:

Name: Address: City-St-Zip:

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: GENE MCCUTCHEON II TD

() Change () Addition

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