

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720814

FILED
Jan 07, 2007
Secretary of State

Entity Name: ARLINGTON LITTLE LEAGUE, INC.

Current Principal Place of Business:

6350 FT CAROLINE RD
PO BOX 8223
JACKSONVILLE, FL 32277

New Principal Place of Business:

Current Mailing Address:

PO BOX 8223
JACKSONVILLE, FL 32239

New Mailing Address:

FEI Number: 59-6611088

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOYLE, WILLIAM E
2002 SOUTHSIDE BLVD
STE 201
JACKSONVILLE, FL 32216 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: DEWOLF, ANSON
Address: 3980 HEIDI RD. W.
City-St-Zip: JACKSONVILLE, FL 32277

Title: VD () Delete
Name: LARRY, WEAVER
Address: 992 PARKRIDGE CIRCLE W.
City-St-Zip: JACKSONVILLE, FL 32211

Title: SD () Delete
Name: OGIN, LAURA
Address: 6101 RAIN FREE ROAD
City-St-Zip: JACKSONVILLE, FL 32277

Title: TD () Delete
Name: MCCUTCHEON II, GENE
Address: 8118 PARKRIDGE CIRCLE N.
City-St-Zip: JACKSONVILLE, FL 32211

Title: D () Delete
Name: BUSH, RONALD
Address: 2520 WEDGEFIELD BLVD
City-St-Zip: JACKSONVILLE, FL 32211

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LARRY, WEAVER
Address: 992 PARKRIDGE CIRCLE W.
City-St-Zip: JACKSONVILLE, FL 32211

Title: VD (X) Change () Addition
Name: DOYLE, WILLIAM
Address: 5613 GRAND CAYMAN RD.
City-St-Zip: JACKSONVILLE, FL 32226

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

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 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

TD

01/07/2007

Electronic Signature of Signing Officer or Director

Date