2006 NOT-FOR-PROFIT CORPORATION

May 04, 2006 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT #724097** 05-04-2006 90252 049 ****61.25 NORTHWEST YOUTH BASEBALL, INC. Principal Place of Business Mailing Address 50018799 NORTHWEST PARK POST OFFICE BOX 57 5801 22ND AVENUE NORTH SAINT PETERSBURG, FL 33731-0057 ST. PETERSBURG, FL 33710 3. Mailing Address 2. Principal Place of Business Suite. Apt. #. etc. Suite. Apt. #. etc. 04182006 CR2E037 (11/05) City & State City & State 4. FEI Number Applied For 59-2635424 Not Applicable Zip Country Zin Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent KEANE, MICHAEL J 770 2ND AVENUE S Street Address (P.O. Box Number is Not Acceptable) SAINT PETERSBURG, FL 33731 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Due by May 1, 2006 Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE TD Deleto Addition TITLE Change PILSBURY, MARJORIE L. NAME NAME 4916 62NO St. Petersb 3933 - 58 LANE NO. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ST PETERSBURG, FL 00000, CITY-ST-ZIP TITLE Delete TITLE Addition WEAVER, WALTER GERDES, NAME NAME TO ZND STREET ADDRESS 5628 BURLINGTON AVE NO STREET ADDRESS CITY-ST-ZIP ST PETERSBURG, FL 33710 CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME KEANE, MICHAEL J NAME STREET ADDRESS 770 2ND AVENUE, S. STREET ADDRESS CiTY-ST-ZIP SAINT PETERSBURG, FL 33701 CITY-ST-7/P TITLE Delete TITLE ☐ Change *Addition DUOLEY WANDS 5648 STZ AVE DUDLEY, WANDA NAME NAME STREET ADDRESS 5648- 52 AVE NO STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG, FL CITY-ST-ZIP HILE Oclete TITLE ☐ Change ☐ Addition NAME LEHMANN, TOM NAME STREET ADDRESS 6749 POINSETTIA AVE SO STREET ADDRESS ST PETERSBURG, FL 33707

12. I hereby certify that the information supplied with this fitting does not qualify for the exemptions contained 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 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

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE:

CATTERTON, RICHARD M

SAINT PETERSBURG, FL 33710

5810 22ND AVE. NORTH

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

LITLE

NAME

☐ Delete

4-24-56 727-580-1767

☐ Change

☐ Addition

FILED