

2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# 731689

FILED
Nov 04, 2004
Secretary of State**Entity Name:** TOWN & COUNTRY PONY BASEBALL, INC.**Current Principal Place of Business:**7301 BASEBALL AVE
TAMPA, FL 33634**New Principal Place of Business:****Current Mailing Address:**PO BOX 260626
TAMPA, FL 33685**New Mailing Address:****FEI Number:** 06-1849003 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.**Name and Address of Current Registered Agent:**SHIVES, LAURA
7301 BASBALL AVE
PO BOX 260626
TAMPA, FL 33685 US**Name and Address of New Registered Agent:**SHIVES, LAURA S WVPT
7301 BASEBALL AVE
PO BOX 260626
TAMPA, FL 33685 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: LAURA S. SHIVES

11/04/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:**Title:** PT () Delete
Name: SHIVES, LAURA
Address: 7301 BASEBALL AVE
City-St-Zip: TAMPA, FL 33634**Title:** WVPT () Delete
Name: SERRANO, LISA
Address: 7301 BASEBALL AVE
City-St-Zip: TAMPA, FL 33634**Title:** SVPT () Delete
Name: SMIT, ED
Address: 7301 BASEBALL AVE
City-St-Zip: TAMPA, FL 33634**Title:** FMD () Delete
Name: PANTELIDIS, LISA
Address: 7301 BASEBALL AVE
City-St-Zip: TAMPA, FL 33634**Title:** FMD () Delete
Name: BUSSEY, GEORGE
Address: 1301 BASEBALL AVE
City-St-Zip: TAMPA, FL 33634**Title:** BD () Delete
Name: ODELL, WAYNE
Address: 7301 BASEBALL AVENUE
City-St-Zip: TAMPA, FL 33634**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** PT (X) Change () Addition
Name: HAHN, JOE
Address: 7301 BASEBALL AVE
City-St-Zip: TAMPA, FL 33634**Title:** WVPT (X) Change () Addition
Name: SHIVES, LAURA
Address: 7301 BASEBALL AVE
City-St-Zip: TAMPA, FL 33634**Title:** SVPT (X) Change () Addition
Name: RUSSELL, BRYAN
Address: 7301 BASEBALL AVE
City-St-Zip: TAMPA, FL 33634**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** ED (X) Change () Addition
Name: ODELL, WAYNE
Address: 7301 BASEBALL AVENUE
City-St-Zip: TAMPA, FL 33634

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LAURA S. SHIVES

WVPT

11/04/2004

Electronic Signature of Signing Officer or Director

Date