

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732342

FILED  
Apr 06, 2008  
Secretary of State

Entity Name: ROCKLEDGE LITTLE LEAGUE, INC.

## Current Principal Place of Business:

924 PELICAN LANE  
ROCKLEDGE, FL 32955

## New Principal Place of Business:

808 GARDENER ROAD  
ROCKLEDGE, FL 32955

## Current Mailing Address:

924 PELICAN LANE  
ROCKLEDGE, FL 32955

## New Mailing Address:

808 GARDENER ROAD  
ROCKLEDGE, FL 32955

FEI Number: 51-0186018

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COFFIN, IRA  
924 PELICAN LANE  
ROCKLEDGE, FL 32955 US

## Name and Address of New Registered Agent:

PARRISH, PATRICK  
808 GARDENER ROAD  
ROCKLEDGE, FL 32955 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: PATRICK PARRISH

04/06/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: COFFIN, IRA  
Address: 924 PELICAN LANE  
City-St-Zip: ROCKLEDGE, FL 32955

Title: S ( ) Delete  
Name: LYON, MICHELE  
Address: 856 SPIREA DRIVE  
City-St-Zip: ROCKLEDGE, FL 32955

Title: T ( ) Delete  
Name: SCHOENEICH, LESLIE  
Address: 1488 WELLINGTON CIR.  
City-St-Zip: ROCKLEDGE, FL 32955

Title: VP ( ) Delete  
Name: DENNIS, DANIEL  
Address: 902 LEVITT PARKWAY  
City-St-Zip: ROCKLEDGE, FL 32955

Title: VP ( ) Delete  
Name: PARRISH, RICHARD  
Address: 808 GARDENER ROAD  
City-St-Zip: ROCKLEDGE, FL 32955

Title: M ( ) Delete  
Name: PRANTL, JOANNE J  
Address: 1355 HERITAGE ACRES BLVD.  
City-St-Zip: ROCKLEDGE, FL 32955

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: PARRISH, PATRICK  
Address: 808 GARDENER ROAD  
City-St-Zip: ROCKLEDGE, FL 32955

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

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

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

Title: VP (X) Change ( ) Addition  
Name: BEATTY-MOIST, BETSI  
Address: 994 BEACON ROAD  
City-St-Zip: ROCKLEDGE, FL 32955

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

I hereby certify that the information supplied with this filing does not qualify 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: LESLIE SCHOENEICH

T

04/06/2008

Electronic Signature of Signing Officer or Director

Date