

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736547

FILED  
Mar 19, 2009  
Secretary of State

**Entity Name:** THE NATIONAL ASSOCIATION OF PROFESSIONAL BASEBALL LEAGUES, INC.

**Current Principal Place of Business:**

NATL. ASSN. PROF. BASEBALL LEAGUES, INC.  
201 BAYSHORE DRIVE, S.E.  
ST. PETERSBURG, FL 33701 US

**New Principal Place of Business:**

**Current Mailing Address:**

NATL. ASSN. PROF. BASEBALL LEAGUES, INC.  
P.O. BOX A  
ST. PETERSBURG, FL 33731 US

**New Mailing Address:**

**FEI Number:** 31-4361072      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

POLEY, D. SCOTT  
201 BAYSHORE DRIVE SE  
ST PETERSBURG, FL 33701 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: P ( ) Delete  
Name: O'CONNER, PAT  
Address: 201 BAYSHORE DR. SE  
City-St-Zip: ST. PETERSBURG, FL

Title: V ( ) Delete  
Name: PURPURA, TIM  
Address: 201 BAYSHORE DR SE  
City-St-Zip: ST PETERSBURG, FL

Title: VP/S ( ) Delete  
Name: POLEY, D. SCOTT  
Address: 201 BAYSHORE DR SE  
City-St-Zip: ST PETERSBURG, FL

Title: TR ( ) Delete  
Name: BERNABE, SAM  
Address: ONE LINE DRIVE  
City-St-Zip: DES MOINES, IA 50309

Title: TR ( ) Delete  
Name: STEIN, ALAN  
Address: 207 LEGENDS LANE  
City-St-Zip: LEXINGTON, KY 40505

Title: TR ( ) Delete  
Name: CARSON, KEN  
Address: 373 DOUGLAS AVE  
City-St-Zip: DUNEDIN, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: TR (X) Change ( ) Addition  
Name: BAGGOTT, DAVE  
Address: 2330 LINCOLN AVENUE  
City-St-Zip: OGDEN, UT 84401

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: /PAT O'CONNER/

PRES

03/19/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date