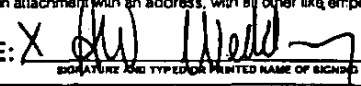


FILED
May 10, 2007 8:00 am
Secretary of State

04-19-2007 90417 018 ****61.25

2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # 739127			
1. Entity Name LUTZ LITTLE LEAGUE, INC.			
Principal Place of Business FERN RD & CROOKED LN CORNER OF LUTZ LK 770 LUTZ LK FERN RD LUTZ, FL 33549 US		Mailing Address FERN RD & CROOKED LN CORNER OF LUTZ LK P.O. BOX 63 LUTZ, FL 33549	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
		4. FEI Number 59-1770812	
		Applied For Not Applicable	
		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WEDDING, HARRY W 17406 ESTES RD. LUTZ, FL 33548		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 resigning) DATE _____			
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P GAY, JEFF 17721 SUNRISE DR. LUTZ, FL 33549 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	P Schindler Pam 2523 High Oak Lane Lutz, FL 33559 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V JONES, SAMUEL 1426 WILLIAMS RD. LUTZ, FL 33558 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PA FAIN, JAMIE 16111 HANNA RD LUTZ, FL 33549 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TRES WEDDING, HARRY 17406 ESTES RD. LUTZ, FL 33548 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Treasurer Hernandez, Dawn 19055 San Rocio Lutz, FL 33549 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D-JR ROBINSON, DUANE 16811 WINSOR PARK DR. LUTZ, FL 33549 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Leach, Sherri - Secretary 520 2nd AVE SE Lutz FL 33549 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S-DR CAGNAIA, RON 18318 DOLLYBROOKE LN. LUTZ, FL 33549 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing 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 changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: X  _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR Date _____ Daytime Phone # _____			