NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 751636 1. Corporation Name

EAST POINT LITTLE LEAGUE OF MANGO, INC.

Principal Place of Busin
P.O. BOX 127
MANGO FL 33550

2. Principal Place of Business

Mailing Address P.O. BOX 127 MANGO FL 33550

2a. Mailing Address

26

FILED Mar 09, 1999 8:00 am § Secretary of State

03-09-1999 90072 039 ****70.00

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3. Date Incorporated or Qualifed

03/20/1980

21		26					1/20/1980				
Suite, Apt.	#, etc.	Suite,	Apt. #, etc.				I Number			App	lied For
22		27				52	-1225450			Not	Applicable
City & Stat	e	City &	State			5. Ca	rtifcate of Status	Desired		\$8.75 A	
23		28				3. 00	THOSE OF OLDIO			Fee Rec	uired
Zip	Country	Zip		Country		6. Ele	ection Campaigr	Financing	П	\$5.00	
24	25	29	30)			ust Fund Contrib			Added to	Fees
	9. Name and Address of Cur	rent Registered A	gent			10. Na	me and Addre	s of New Re	gistered A	gent	
				81	Name -	DENA	116 /	FARRA	R.		
BALL, JER	KPV I			82							
				"-	040007100						
1803 DANA COURT BRANDON FL 33510			1310 RUSTLEWOOD DR								
DIVINDON	11 533 10			-		1010	RUSTL	WOOD	<i>U</i> ~ .	85 Zip C	ode
				84	City .	BRAI	NOON		FL	33	510
11. Pursuant	to the provisions of Sections 617.0	502 and 617.1508	, Florida Statutes,	the above	-named cor	poration su	bmits this state	ment for the p	urpose of o	hanging its r	egistered
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.											
	A Sun S	au	TARRA	wa				2//	8/99	;	· . }
SIGNATURE	Signature, a part or printed name of registered	agent and title if applicable	e. (NOTE: Re	gistered Agen	t signature requir				DAFIC		
12.	OFFICERS	AND DIRECTORS	S	13.			DITIONS/CHAN	SES TO OFFI	ICERS AND		
TITLE	PD		☐ DELETE	1,1 TITLE		PD				Change	☐ Addition
NAME	WILLIAMS, KIM			1.2 NAME			Sugas	_			
STREET ADDRESS	1216 CITRUS HILL COURT		:	1.3 STREET			. LENNA				•
CITY-ST-ZIP	SEFFNER FL			1.4 CITY- \$1	- ZIP	SEFFI	NUM PL				
TITLE	VD		☐ DELETE	2.1 TTLE						Change	☐ Addition
NAME	NUNES, PAUL			2.2 NAME							,
STREET ADDRESS	1617 DOGWOOD LN			2.3 STREET	ADDRESS					•	}
CITY-ST-ZIP	BRANDON FL		•	2. 4 CITY-S	T-ZIP						
TITLE	TD		☐ DELETE	3.1 TITLE	7	TD			•	Change	☐ Addition
NAME	BALL JERRY L			3.2 NAME	7	DENNY.	s L. FAR	RAR			
STREET ADDRESS	(Ti TT'_1Ti i' Ti			3.3 STREET	ADDRESS /	1310 R	USTLEWO	OD DR	~		.
CITY-ST-ZIP	BRANDON FL 33510			3.4. CITY+S	T-ZIP	BRAN	DON, FL	33510			
TITLE			☐ DELETE	4.1 TITLE						Change	☐ Addition
NAME				4. 2 NAME							
STREET ADDRESS				4.3 STREET	ADDRESS						
CITY-ST-ZIP				4.4 CITY-S	r-ZIP						,
TITLE			☐ DELETE	5.1 TITLE						Change	Addition
NAME				5.2 NAME							
STREET ADDRESS				5.3 STREET	ADDRESS						
CITY-ST-ZIP				5.4 CITY-\$	r-ZIP					<u> </u>	
TITLE			DELETE	6.1 TITLE						Change	Addition
NAME				6.2 NAME				• •			1
STREET ADDRESS				6.3 STREET	ADDRESS						
CITY-ST-ZIP				6.4 CITY-S	r-ZiP						1
14. hereby	certify that the information supplied	with this filing doe	es not qualify for th	e exempt	on stated in	Section 1	19.07(3)(i), Florid	la Statutes. I	further cert	ify that the in	formation

indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.