

FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## 1999 **DOCUMENT # 754752**

1. Corporation Name

CORAL SPRINGS WINTER BASEBALL, INC.

Principal Place of Business 405 NW 108TH AVE. CORAL SPRINGS FL 33071

2. Principal Place of Business

unchanged

Mailing Address

405 NW 108TH AVE. **CORAL SPRINGS FL 33071** 

2a. Mailing Address

unchanged

## **FILED** Mar 10, 1999 8:00 am § Secretary of State

03-10-1999 90206 007 \*\*\*\*70.00



3. Date Incorporated or Qualifed

10/21/1980

| Sui  | ite, Apt.   | #, etc.                   |                                 |            | Suite, Apt. #, etc.   |  |   | 4. | FEI Number                      |           | App      | lied For            |  |
|--|-------------|---------------------------|---------------------------------|------------|-----------------------|--|---|----|---------------------------------|-----------|----------|---------------------|--|
| 22   | •           |                           |                                 | 27         |                       |  |   | 1  | NOT APPLICABLE                  |           | Not      | Applicable          |  |
|  | y & State   | <del></del>               |                                 |            | City & State          |  |   | _  | . Certificate of Status Desired | τ₽÷       | \$8.75 A |                     |  |
| 23   | unc         | hanged                    |                                 | 28         | unchanged             | 7  |   | 3. | . Certificate of Status Desired | A-A       | Fee Red  | uired               |  |
| Zip  |             |                           | Country                         |            | Zip                   | Country                                      |   | 6. | Election Campaign Financing     |           | \$5.00 r |                     |  |
| 24   | un          | chang 🖼                   | unchanged                       | 29         | unchanged 30          | un   | chanq   |    | Trust Fund Contribution         |           | Added to | Fees                |  |
|  | 9. Name and | Address of Current R      | legist                          | ered Agent |                       | 10. Name and Address of New Registered Agent |   |    |                                 |           |          |                     |  |
|  |             |                           |                                 |            |                       |  | Name  |    |                                 |           |          |                     |  |
| VITTA, LOU   |             |                           |                                 |            |                       | 82   | 82 Street Address (P.O. Box Number is Not Acceptable) |    |                                 |           |          |                     |  |
| 405 NW 108TH AVE.  |             |                           |                                 |            |                       |  |   |    |                                 |           |          |                     |  |
| CORAL SPGS FL 33071  |             |                           |                                 |            |                       | 83   |   |    | _                               |           |          |                     |  |
|  |             |                           |                                 |            |                       |  | City  |    |                                 |           | 85 Zip C | ode                 |  |
|  |             |                           |                                 |            |                       | 84   | ,   |    |                                 | <u> </u>  |          |                     |  |
| 11. Pursuant to the provisions of Sections 67.0502 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, included the composition submission subm |             |                           |                                 |            |                       |  |   |    |                                 |           |          |                     |  |
| SIGNATURE Step at A project project depart of project project speed appear of project  |             |                           |                                 |            |                       |  |   |    |                                 |           |          |                     |  |
| SIGIA  | ATURE       | Signature, typed or print | ted name of registered agent an | d title if | applicable. (NOTE: Re |  | t signature requi                                     |    |                                 |           |          |                     |  |
| 12.  |             |                           | OFFICERS AND I                  | DIRE       | ~                     | 13.  |   |    | ADDITIONS/CHANGES TO OF         | FICERS AN |          |                     |  |
| TITLE  |             | S                         |                                 |            | ☐ DELETE              | 1.1 TITLE                                    |   |    |                                 |           | Change   | ☐ Addition          |  |
| NAME   |             | VITTA, CAROL              |                                 |            |                       | 1.2 NAME                                     |   |    |                                 |           | ,        |                     |  |
| STREET   | ADDRESS     | 405 NW 108 A              |                                 |            |                       | 1.3 STREET                                   | ADDRESS   |    |                                 |           |          |                     |  |
| CITY-ST-   | - ZIP       | CORAL SPRIN               | GS FL                           |            |                       | 1.4 CITY-ST                                  | T-ZIP   |    |                                 |           |          | <b>53.</b> 3. 4.000 |  |
| TITLE  | ]           | D                         |                                 |            | ☐ DELETE              | 2.1 TITLE                                    |   |    |                                 | •         | Change   | Addition            |  |
| NAME   | Ì           | ARENA, MICH               | AEL                             |            |                       | 2.2 NAME                                     | Ì   |    |                                 |           |          | ]                   |  |
| STREET   | ADDRESS     | 2130 NW 110               |                                 |            |                       | 2.3 STREET                                   | FADDRESS  |    |                                 |           |          | )                   |  |
| CITY-ST  | Γ- ZIP      | CORAL SPRIN               | GS FL                           |            |                       | 2.4 CITY-S                                   | T-ZIP   |    |                                 |           |          |                     |  |
| TITLE  |             | D                         |                                 |            | ☐ DELETE              | 3.1 TITLE                                    |   |    | •                               |           | Change   | Addition            |  |
| NAME   |             | MILLER, TED               |                                 |            |                       | 3.2 NAME                                     |   |    |                                 |           |          |                     |  |
| STREET   | ADDRESS     | 11913 N W 30              | ST                              |            |                       | 3.3 STREET                                   | ADDRESS   |    |                                 |           | . •      |                     |  |
| CITY-ST  | r-ZIP       | CORAL SPRIN               | GS FL 33065                     |            |                       | 3.4. CITY-S                                  | T-ZIP   |    |                                 |           | ·        |                     |  |
| TITLE  |             | DP                        |                                 |            | ☐ DELETE              | 4.1 TITLE                                    | }   |    |                                 |           | Change   | ☐ Addition          |  |
| NAME   |             | VITTA, LOU                |                                 |            |                       | 4. 2 NAME                                    |   |    |                                 |           |          |                     |  |
| STREET   | ADDRESS     | 405 N.W. 108              |                                 |            |                       | 4.3 STREET                                   | T ADDRESS   |    |                                 |           |          |                     |  |
| CITY-ST  | r-ZIP       | CORAL SPRIN               | GS FL                           |            |                       | 4.4 CITY-ST                                  | T-ZIP   |    | <del> </del>                    |           |          |                     |  |
| TITLE  |             | D                         |                                 |            | ☐ DELETE              | 5.1 TITLE                                    |   |    |                                 |           | Change   | Addition            |  |
| NAME   |             | RICHMOND, F               |                                 |            |                       | 5.2 NAME                                     |   |    |                                 |           |          |                     |  |
| STREET   | ADDRESS     | 361 N W 111T              |                                 |            |                       | 5.3 STREET                                   |   |    |                                 |           |          | •                   |  |
| CITY-ST-   | -ZIP        | CORAL SPRIN               | GS FL 33071                     |            |                       | 5.4 CITY-ST                                  | T-ZIP   |    |                                 |           |          |                     |  |
| TITLE  |             |                           |                                 |            | ☐ DELETE              | 6.1 TITLE                                    | ŀ   |    | •                               | •         | Change   | ☐ Addition          |  |
| NAME   |             |                           |                                 |            |                       | 6.2 NAME                                     |   |    |                                 |           |          |                     |  |
| STREET.  | ADDRESS     |                           |                                 |            |                       | 6.3 STREET                                   | T ADDRESS   |    |                                 |           |          |                     |  |
| CITY-ST  | r- ZIP      |                           |                                 |            |                       | 6.4 CITY-ST                                  | T-ZIP   |    |                                 | · .       |          |                     |  |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual poort 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 of trastee 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.

SIGNATURE: