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 May 19 1998 8:00am
 Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998

FLORIDA DEPARTMENT OF STATE
 Sandra B. Morjham
 Secretary of State
 DIVISION OF CORPORATIONS



DOCUMENT # 757493 (2)
 1. Corporation Name
 EUSTIS LITTLE LEAGUE, INC.



Principal Place of Business Mailing Address
 GOLFLINKS AND KURT STREET P.O. BOX 1100 EUSTIS FL 32727-8100
 GOLFLINKS AND KURT STREET P.O. BOX 1100 EUSTIS FL 32727-8100

3. Date Incorporated or Qualified
 04/10/1981

4. FEI Number 59-2114379 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business 2a. Mailing Address
 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
 22 City & State 27 City & State
 23 Zip Country 28 Zip Country
 24 25 29 30

9. Name and Address of Current Registered Agent
 STOLTZ, GARY
 3001 JOANNA DR.
 EUSTIS FL 32726

10. Name and Address of New Registered Agent
 81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City FL 85 Zip Code

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.

SIGNATURE: *[Signature]* GARY K. STOLTZ 4-20-98
 (NOTE: Registered Agent signature required when relistening) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	P
NAME	LEE, CHRIS	1.2 NAME	TERRY RAY
STREET ADDRESS	318 WOODLAND DR	1.3 STREET ADDRESS	34751 CATTAIL DR
CITY-ST-ZIP	EUSTIS, FL 00000	1.4 CITY-ST-ZIP	EUSTIS, FL 32726
TITLE	D	2.1 TITLE	D
NAME	PATTEN, RUSSEL	2.2 NAME	HARRY TOMLINSON
STREET ADDRESS	33619 LAKE JOANNA DR.	2.3 STREET ADDRESS	36956 Lake Yale Dr
CITY-ST-ZIP	EUSTIS FL	2.4 CITY-ST-ZIP	Grand Island, FL 32726
TITLE	SD	3.1 TITLE	SD
NAME	ALLEN, CHUCK	3.2 NAME	CHUCK ALLEN
STREET ADDRESS	19911 BAY LAKE RD.	3.3 STREET ADDRESS	19911 Bay Lake Rd
CITY-ST-ZIP	EUSTIS FL	3.4 CITY-ST-ZIP	EUSTIS, FL 32726
TITLE	V	4.1 TITLE	D
NAME	COMPTON, BILL	4.2 NAME	KATHY CLEMENTS
STREET ADDRESS	1841 LAKE TERRACE DR.	4.3 STREET ADDRESS	142 TIMBER LN
CITY-ST-ZIP	EUSTIS FL	4.4 CITY-ST-ZIP	EUSTIS, FL 32726
TITLE	SD	5.1 TITLE	
NAME	SMITH, DENNIS	5.2 NAME	
STREET ADDRESS	1720 MORIN ST.	5.3 STREET ADDRESS	
CITY-ST-ZIP	EUSTIS FL	5.4 CITY-ST-ZIP	
TITLE	TD	6.1 TITLE	
NAME	STOLTZ, GARY	6.2 NAME	
STREET ADDRESS	3001 JOANNA DR.	6.3 STREET ADDRESS	
CITY-ST-ZIP	EUSTIS FL	6.4 CITY-ST-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 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.

SIGNATURE: *[Signature]* GARY K. STOLTZ TRER 4-20-98

CP2E037 (10/97)