

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757493

FILED
Jan 04, 2006
Secretary of State

Entity Name: EUSTIS LITTLE LEAGUE, INC.

Current Principal Place of Business:

GOLFLINKS AND KURT STREET
P.O. BOX 1100
EUSTIS, FL 327278100

New Principal Place of Business:

450 GOLFLINKS ROAD
EUSTIS, FL 32726

Current Mailing Address:

2785 BAY ST, SUITE D
EUSTIS, FL 32726

New Mailing Address:

PO BOX 1100
EUSTIS, FL 32727

FEI Number: 59-2114379

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WEISS, DAVID L
2785 BAY ST, SUITE D
EUSTIS, FL 32726 US

Name and Address of New Registered Agent:

FOWLER, JOLIE S PRESIDE
PO BOX 350024
GRAND ISLAND, FL 32735 US

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: JOLIE S FOWLER PRESIDENT

01/04/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: T () Delete
Name: GETFORD, SHERRY
Address: 39701 EMERALDO ISLAND ROAD
City-St-Zip: LEESBURG, FL 34788

Title: P () Delete
Name: FOWLER, JOLIE
Address: PO BOX 350024
City-St-Zip: GRAND ISLAND, FL 32735

Title: V () Delete
Name: CLAYTON, TERRI
Address: 2645 WATERVIEW DR.
City-St-Zip: EUSTIS, FL 32726

Title: S () Delete
Name: JOHNSON, LAURIE
Address: 36101 HUFF ROAD
City-St-Zip: EUSTIS, FL 32736

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: S (X) Change () Addition
Name: GETFORD, SHERRY
Address: 39701 EMERALDO ISLAND ROAD
City-St-Zip: LEESBURG, FL 34788

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

Title: VP (X) Change () Addition
Name: BURGESS, MIKE
Address: 151 BOARDMAN DRIVE
City-St-Zip: UMATILLA, FL 32784

Title: T (X) Change () Addition
Name: GRISWOLD, TINA
Address: PO BOX 1100
City-St-Zip: EUSTIS, FL 32727

I hereby certify that the information supplied with this filing does not qualify for the 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: JOLIE S FOWLER

P

01/04/2006

Electronic Signature of Signing Officer or Director

Date