

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763180

FILED
Feb 02, 2009
Secretary of State

Entity Name: ST. AUGUSTINE LITTLE LEAGUE, INC.

Current Principal Place of Business:

P.O. BOX 305
ST. AUGUSTINE, FL 32085

New Principal Place of Business:

100 WALER WAY
ST. AUGUSTINE, FL 32086

Current Mailing Address:

P.O. BOX 305
ST. AUGUSTINE, FL 32085

New Mailing Address:

FEI Number: 52-1287648 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PELLICER, XAVIER L III
906 ANASTASIA BLVD.
SUITE A
ST AUGUSTINE, FL 32080 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MARTIN, MARTY
Address: 237 MONTEREY AVE
City-St-Zip: SAINT AUGUSTINE, FL 32084

Title: D () Delete
Name: OAKES, DEBBIE
Address: 221 JASMINE RD
City-St-Zip: SAINT AUGUSTINE, FL 32086

Title: PD () Delete
Name: PELLICER, XAVIER L III
Address: 3 GARCIA AVE
City-St-Zip: ST AUGUSTINE, FL 32080

Title: DTV () Delete
Name: SLAMKA, STACEY
Address: 157 KING ARTHUR CT
City-St-Zip: ST AUGUSTINE, FL 32086

Title: DV () Delete
Name: BYRD, STACY
Address: 9350 BYRD RD
City-St-Zip: HASTINGS, FL 32145

Title: DV () Delete
Name: CZAKO, MARTY
Address: 155 HAWTHORNE RD
City-St-Zip: ST AUGUSTINE, FL 32086

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: D (X) Change () Addition
Name: SLAMKA, STACEY
Address: 157 KING ARTHUR CT
City-St-Zip: ST AUGUSTINE, FL 32086

Title: DT (X) Change () Addition
Name: WALER, RICHARD L III
Address: 212 N. MATANZAS BLVD.
City-St-Zip: ST. AUGUSTINE, FL 32080

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

I hereby certify that the information supplied with this filing does not qualify 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: RICHARD L. WALER III

DT

02/02/2009

Electronic Signature of Signing Officer or Director

Date