


# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 31, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # F93000003452</b> 1. Entity Name BASEBALL CORPORATION OF AMERICA	
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Principal Place of Business C/O MIRACLE BASEBALL 14400 SIX MILE CYPRESS PARKWAY FORT MYERS, FL 33912	Mailing Address C/O MIRACLE BASEBALL 14400 SIX MILE CYPRESS PARKWAY FORT MYERS, FL 33912
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01182006 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 13-3540714	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent  
  
ENGEL, WAYNE  
14400 SIX MILE CYPRESS PKWY  
FT MYERS, FL 33912

**DO NOT WRITE IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable.

<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2006 Fee will be \$550.00</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GOLDKLANG, MARVIN S 21 COVENTRY RD. LIVINGSTON, NJ 07039
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GOLDKLANG, SHEILA B 21 COVENTRY RD. LIVINGSTON, NJ 07039
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1000000408659  
02/08/06-80068-014 150.00

**DO NOT WRITE IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:**  1-24-06  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #