

# 2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L08000037612

FILED  
Apr 23, 2009  
Secretary of State

**Entity Name:** SALADINO BASEBALL ACADEMY AND SPORTS TRAINING, LLC

**Current Principal Place of Business:**

776 W. LUMSDEN ROAD, SUITE 106  
BRANDON, FL 33511

**New Principal Place of Business:**

776 W. LUMSDEN ROAD  
SUITE 106  
BRANDON, FL 33511

**Current Mailing Address:**

776 W. LUMSDEN ROAD, SUITE 106  
BRANDON, FL 33511

**New Mailing Address:**

776 W. LUMSDEN ROAD  
SUITE 106  
BRANDON, FL 33511

**FEI Number:** 26-2426407

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHAFFER, JAMES R  
120 SOUTH WILLOW AVE.  
TAMPA, FL 33606 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

**MANAGING MEMBERS/MANAGERS:**

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES:**

Title: MGR ( ) Change (X) Addition  
Name: SALADINO, TONY III  
Address: 505 ROYAL WOOD COURT  
City-St-Zip: VALRICO, FL 33594

Title: MGR ( ) Change (X) Addition  
Name: SCOLARO, DONALD JR  
Address: 2601 BERRYVINE PLACE  
City-St-Zip: VALRICO, FL 33596

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: TONY SALADINO III

MGR

04/23/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date