2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 15, 2007
Secretary of State

DOCUMENT# N00000000721

Entity Name: POINCIANA LITTLE LEAGUE INC.

Current Principal Place of Business:

47 DORSET DRIVE
KISSIMMEE, FL 34758

New Principal Place of Business:

Current Mailing Address:

47 DORSET DRIVE
KISSIMMEE, FL 34758

New Mailing Address:

FEI Number: 59-3504457 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

PATTERSON, KIMBERLY
907 CAMBRIDGE COURT
KISSIMMEE, FL 32758 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: P/D ( ) Delete
Name: MILANI, ELISE
Address: 47 DORSET DRIVE
City-St-Zip: KISSIMMEE, FL 34758

Title: T/D ( ) Delete
Name: SHULTS, TIFFANY
Address: 301 JACKSONVILLE COURT
City-St-Zip: KISSIMMEE, FL 34759

Title: S/D ( ) Delete
Name: PATTERSON, KIMBERLY
Address: 907 CAMBRIDGE COURT
City-St-Zip: KISSIMMEE, FL 35758

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: T/D (X) Change ( ) Addition
Name: DIAZ, MIGUEL
Address: 826 CABARET COURT
City-St-Zip: KISSIMMEE, FL 34759

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

Title: VP/D ( ) Change (X) Addition
Name: HEALY, ROBERT
Address: 1857 SNAPPER DRIVE
City-St-Zip: KISSIMMEE, FL 34759

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: KIMBERLY PATTERSON S/D 02/15/2007

Electronic Signature of Signing Officer or Director — Date