## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0000001307

FILED Jan 16, 2009 Secretary of State

Entity Name: OKEEHEELEE YOUTH BASEBALL, INC. **Current Principal Place of Business: New Principal Place of Business:** 7715 FOREST HILL BLVD. WEST PALM BEACH, FL 33415 **Current Mailing Address: New Mailing Address:** P O BOX 20363 WEST PALM BEACH, FL 33416 FEI Number: 65-1052212 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SAUNDERS, TIMOTHY 6263 BARTÓN CREEK CIRCLE LAKE WORTH, FL 33463 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change ( ) Addition WAGER, CURTIS COOK, ERIC Name: Name: Address: 6581 RIPARIAN RD Address: 39 SPRINGDALE RD City-St-Zip: LANTANA, FL 33462 City-St-Zip: LAKE WORTH, FL 33467 Title: () Delete Title: () Change () Addition SAUNDERS, AUDRA Name: Name: Address: 6263 BARTON CREEK CIR Address: City-St-Zip: LAKE WORTH, FL 33463 City-St-Zip: Title: () Delete Title: () Change () Addition SAUNDERS, TIMOTHY Name: Name: 6263 BARTON CREEK DR Address: Address: City-St-Zip: LAKE WORTH, FL 33463 City-St-Zip: Title: () Delete Title: ( ) Change (X) Addition Name: Name: FAUROT, GRETCHEN 610 SEAPINE WAY UNIT D1 Address: Address: City-St-Zip: City-St-Zip: WEST PALM BEACH, FL 33415

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: AUDRA SAUNDERS D 01/16/2009