

2001 UNIFORM BUSINESS REPORT (UBR)**FILED****Sep 05, 2001 08:00 AM****Secretary of State****DOCUMENT # N00000002120**1. Entity Name
ANTHONY LITTLE LEAGUE, INC.

Principal Place of Business	Mailing Address
2441 N.E. 48TH ST.	2441 N.E. 48TH ST.
OCALA FL 34479	OCALA FL 34479

2. Principal Place of Business	3. Mailing Address
2140 NE 95TH STREET	P.O. BOX 134
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State	City & State
ANTHONY FL	ANTHONY FL
Zip	Country
32617 US	326170134 US

4. FEI Number	Applied For
59-2879421	Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
MILLER O. DEANN 2441 N.E. 48TH ST. OCALA FL 34479	Name BARROW MICHAEL CPRES Street Address (P.O. Box Number is Not Acceptable) 2598 NE 07TH ST RD/PO BOX 974 City ANTHONY FL Zip Code 326170974

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.

SIGNATURE **MICHAEL C BARROW** **09/05/2001**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstalling) DATE

FILE NOW: FEE IS \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Department of State
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10. OFFICERS AND DIRECTORS	11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10																								
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 617, 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: **MICHAEL C BARROW** PD 09/05/2001

CR2E037 (11/00)