2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N01000000071

Entity Name: KEYSTONE LITTLE LEAGUE, INC.

FILED Dec 05, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

ED RADICE SPORTS COMPLEX
ODESSA, FL 33556

ED RADICE SPORTS COMPLEX
14720 ED RADICE DRIVE

ODESSA, FL 33556

Current Mailing Address: New Mailing Address:

P. O. BOX 604 12157 W. LINEBAUGH AVENUE, #164

ODESSA, FL 33556 TAMPA, FL 33626

FEI Number: 59-3692774 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

SKELTON, PATRICK W 400 N. ASHLEY DR., #2300 TAMPA, FL 33602 US SKELTON, PATRICK 400 N. ASHLEY DRIVE, #2300 TAMPA, FL 33602 US

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: PATRICK SKELTON 12/05/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Name:

NAPOLITANO, GIL

() Delete

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition

Name: WEISMAN, LINDA

Address: 11006 NEST COURT Address: 10631 GRETNA GREEN DRIVE

City-St-Zip: ODESSA, FL 33556 City-St-Zip: TAMPA, FL 33626

Title: TREA () Delete Title: TREA (X) Change () Addition Name: NAPOLITANO, ARLENE Name: FAGAN, DOUG

Address: 11006 NEST COURT Address: 11818 MARBLEHEAD DRIVE

City-St-Zip: ODESSA, FL 33556 City-St-Zip: TAMPA, FL 33626

Title:SEC () DeleteTitle:SEC (X) Change () AdditionName:MEDINA, JENNIFERName:SANFORD, WENDIAddress:26841 GLEN HAVEN ROADAddress:12531 DEERBERRY LANE

City-St-Zip: WESLEY CHAPEL, FL 33544 City-St-Zip: TAMPA, FL 33626

Title: D (X) Delete Title: () Change () Addition

 Name:
 MITCHELL, LENNY
 Name:

 Address:
 16219 HOLYLAKE DRIVE
 Address:

 City-St-Zip:
 ODESSA, FL 33556
 City-St-Zip:

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: LINDA WEISMAN PRES 12/05/2008