2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
May 18, 2005
Secretary of State

DOCUMENT# N01000000154

Entity Name: ST. PETERSBURG BLACK SOX, INC.

Current Principal Place of Business:

1401 ESSEX DR N
ST PETERSBURG, FL 33710

New Principal Place of Business:

Current Mailing Address:

1401 ESSEX DR N
ST PETERSBURG, FL 33710

New Mailing Address:

FEI Number: 59-3690338 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

MCMILLAN, REED
1401 ESSEX DR N
ST PETERSBURG, FL 33710 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: D ( ) Delete
Name: MCMILLAN, REED
Address: 1401 ESSEX DR N
City-St-Zip: ST PETERSBURG, FL 33710

Title: D ( ) Delete
Name: MCMILLAN, DEBORAH
Address: 1401 ESSEX DR N
City-St-Zip: ST PETERSBURG, FL 33710

Title: D ( ) Delete
Name: VIDA, JAMES
Address: 4018 JERRY DR
City-St-Zip: LAKELAND, FL 33813

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: VP ( ) Change (X) Addition
Name: CORNWELL, ERIC
Address: 517 COLUMBIA DR
City-St-Zip: TAMPA, FL 33613

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: REED MCMILLAN PRES 05/18/2005

Electronic Signature of Signing Officer or Director — Date