

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000002982

FILED
May 17, 2004
Secretary of State**Entity Name:** CUTLER RIDGE KNIGHTS AMATEUR TRAVEL BASEBALL ASSOCIATION, INC.**Current Principal Place of Business:**18520 SW 128 AVE
MIAMI, FL 33177 US**New Principal Place of Business:****Current Mailing Address:**18520 SW 128 AVE
MIAMI, FL 33177 US**New Mailing Address:****FEI Number:** 65-1101115**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**BLANCO, MODESTO
18520 SW 128 AVENUE
MIAMI, FL 33177 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: PD () Delete
Name: BLANCO, MODESTO
Address: 18520 SW 128 AVENUE
City-St-Zip: MIAMI, FL 33177 US

Title: VP () Delete
Name: SALMON, ALFRED
Address: 14871 SW 157TH CT
City-St-Zip: MIAMI, FL 33159 US

Title: T () Delete
Name: GOODPASTORE, RUTH
Address: 8721 SW 186 ST
City-St-Zip: MIAMI, FL US

Title: SD () Delete
Name: BLANCO, MIRIAM
Address: 18520 SW 128 AVE
City-St-Zip: MIAMI, FL 33177 US

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

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: MODESTO L BLANCO

PRES

05/17/2004

Electronic Signature of Signing Officer or Director

Date