

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006207

FILED
Jan 17, 2006
Secretary of State

Entity Name: COUGAR BASEBALL CLUB, INC.

Current Principal Place of Business:

491 N.W. 42 AVE
COCONUT CREEK, FL 33066

New Principal Place of Business:

Current Mailing Address:

491 N.W. 42 AVE.
COCONUT CREEK, FL 33066

New Mailing Address:

FEI Number: 65-1138989

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEMIN, SHANE M
491 N.W. 42 AVE.
COCONUT CREEK, FL 33066 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: LEMIN, SHANE
Address: 491 NW 42ND AVE.
City-St-Zip: COCONUT CREEK, FL 33066

Title: TD () Delete
Name: SEELY, JENNIFER
Address: 6371 SW 1ST
City-St-Zip: MARGATE, FL 33068

Title: SD () Delete
Name: GOGA, ANNETTE
Address: 4281 NW 9TH COURT
City-St-Zip: COCONUT CREEK, FL 33066

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TD (X) Change () Addition
Name: SPECHT-RARIDEN, DONNA
Address: 8203 S.W. 12 PLACE
City-St-Zip: NORTH LAUDERDALE, FL 33068

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 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: SHANE M. LEMIN

PD

01/17/2006

Electronic Signature of Signing Officer or Director

Date