2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000006553

FILED Mar 19, 2009 Secretary of State

Entity Name: WEST HERNANDO LITTLE LEAGUE INC.

Current Principal Place of Business: New Principal Place of Business: 2313 FOUNDER RD **BALL PARK** SPRING HILL, FL 34606 **New Mailing Address: Current Mailing Address:** PO BOX 6783 SPRING HILL, FL 34611 FEI Number: 59-3743298 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: PEACOCK, JOHN 7307 JOMÉL DR SPRING HILL, FL 34607 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete SCHNYDERITE, RAY Name: Name: 4926 KEYSVILLE DR Address: Address: City-St-Zip: SPRING HILL, FL 34608 City-St-Zip: Title: () Delete Title: VΡ (X) Change () Addition COTILLETTA, THERESA Name: PEACOCK, JOHN Name: Address: 11647 LINDEN DR Address: 7307 JOMEL DR City-St-Zip: SPRING HILL, FL 34608 City-St-Zip: SPRING HILL, FL 34607 Title: () Delete Title: (X) Change () Addition PEACOCK, JOHN FORD, ROBERT Name: Name: 7307 JOMEL DR 16321 HERON HILLS DR Address: Address: City-St-Zip: SPRING HILL, FL 34607 City-St-Zip: SPRING HILL, FL 34610 Title: Title: (X) Change () Addition () Delete Name: CERINO, MARY Name: MULYCK, GINA 2346 DELTONA BLVD 5390 COLCHESTER AVE Address: Address: City-St-Zip: SPRING HILL, FL 34606 City-St-Zip: SPRING HILL, FL 34608 Title: () Delete Title: () Change () Addition KLIEN, KENNY Name: Name: 8101 PHILATELIC DR Address: Address: City-St-Zip: SPRING HILL, FL 34606 City-St-Zip: Title: () Delete Title: (X) Change () Addition CHARLWOOD, JERRY MASSON, TOM Name: Name: Address: 5203 BATLOCK Address: 98 FOREST WOOD CT SPRING HILL, FL 34608 SPRING HILL, FL 34609 City-St-Zip: 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: ROBERT FORD T 03/19/2009