

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007231

FILED
Jan 16, 2009
Secretary of State

Entity Name: RAVENS BASEBALL CLUB INC.

Current Principal Place of Business:

1107 W. ADALEE ST.
TAMPA, FL 33603

New Principal Place of Business:

Current Mailing Address:

1107 W. ADALEE ST.
TAMPA, FL 33603

New Mailing Address:

FEI Number: 59-3758922

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FAEDO, ORLANDO L
1107 W. ADALEE ST.
TAMPA, FL 33603 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: FAEDO, ORLANDO L D
Address: 1107 W. ADALEE ST.
City-St-Zip: TAMPA, FL 33603 US

Title: T () Delete
Name: BRAUTIGAM, JOSEPH E T
Address: 7211 N CORTEZ AVE.
City-St-Zip: TAMPA, FL 33614 US

Title: T () Delete
Name: JOHNSON, SHERMAN T
Address: 11302 GEORGETOWN CIRCLE
City-St-Zip: TAMPA, FL 33635 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:

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: ORLANDO L. FAEDO

D

01/16/2009

Electronic Signature of Signing Officer or Director

Date