2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007866

Current Principal Place of Business:

City-St-Zip:

PALM COAST, FL 32164

Entity Name: PALM COAST LITTLE LEAGUE, INC.

FILED Jan 15, 2009 Secretary of State

8 CARLOS COURT PALM COAST, FL 32137 **Current Mailing Address: New Mailing Address:** PO BOX 352597 PALM COAST, FL 321352597 FEI Number: 59-3753956 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: LEWERS, FRED 8 CARLOS COURT PALM COAST, FL 32137 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:

New Principal Place of Business:

() Delete VD (X) Change () Addition ESPOSITO, MICHAEL MARCEY, REID Name: Name: 5 FLINT PL Address: WHITE BIRCH LANE Address: City-St-Zip: PALM COAST, FL 32137 City-St-Zip: PALM COAST, FL 32164 Title: Title: () Delete () Change () Addition Name: ESPOSITO, SUSAN Name: Address: **5 FLINT PLACE** Address: City-St-Zip: PALM COAST, FL 32137 City-St-Zip: Title: (X) Delete Title: () Change () Addition MARLEY, REID Name: Name: 13 WHITE BIRCH LANE Address: Address: City-St-Zip: PALM COAST, FL 32164 City-St-Zip: Title: TD () Delete Title: () Change () Addition LEWERS, FRED Name: Name: Address: 8 CARLOS COURT Address: City-St-Zip: PALM COAST, FL 32137 City-St-Zip: Title: () Delete Title: () Change () Addition ZVIERKO, CYNTHIA M Name: Name: 37 PINWHEEL LANE Address: Address:

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.

City-St-Zip:

SIGNATURE: FRED W. LEWERS DIR 01/15/2009