

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000001365

FILED
Jan 10, 2007
Secretary of State

Entity Name: FLORIDA AMATEUR BASEBALL ASSOCIATION, INC.

Current Principal Place of Business:

2700 BAYNAN RD.
C-2
BOCA RATON, FL 33432

New Principal Place of Business:

2700 BANYAN RD.
C-2
BOCA RATON, FL 33432

Current Mailing Address:

2700 BAYNAN RD.
C-2
BOCA RATON, FL 33432

New Mailing Address:

2700 BANYAN RD.
C-2
BOCA RATON, FL 33432

FEI Number: 56-2286934

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COWEN, JAMES
2700 BANYAN RD.
C-2
BOCA RATON, FL 33432 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: P () Delete
Name: COWEN, JAMES
Address: 2700 BANYAN RD. C-2
City-St-Zip: BOCA RATON, FL 33432

Title: VP () Delete
Name: BUSH, FRED
Address: 1540 NW 1ST AVE.
City-St-Zip: BOCA RATON, FL 33432

Title: S () Delete
Name: ROBERTS, MIKE
Address: 793 NW 123 DRIVE
City-St-Zip: CORAL SPRINGS, FL 33071

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 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: JAMES M COWEN

P

01/10/2007

Electronic Signature of Signing Officer or Director

Date