

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003159

FILED  
Apr 16, 2009  
Secretary of State

Entity Name: SUWANNEE VALLEY LEAGUES, INC.

## Current Principal Place of Business:

114 NORTHEAST FIRST STREET  
TRENTON, FL 32693

## New Principal Place of Business:

114 NORTHEAST FIRST STREET  
TRENTON, FL 32693 US

## Current Mailing Address:

P.O. BOX 308  
TRENTON, FL 32693

## New Mailing Address:

POST OFFICE BOX 308  
TRENTON, FL 32693 US

FEI Number: 06-1683346

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

BURT, THEODORE M  
114 NORTHEAST FIRST STREET  
TRENTON, FL 32693 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: BM ( ) Delete  
Name: HALEY, CLOUD  
Address: 621 NE 2ND STREET  
City-St-Zip: TRENTON, FL 32693

Title: BM ( ) Delete  
Name: BRYANT, TODD  
Address: 6600 SW 65TH STREET  
City-St-Zip: TRENTON, FL 32693

Title: TD ( ) Delete  
Name: BRYANT, TODD S  
Address: 6600 SW 65TH ST  
City-St-Zip: TRENTON, FL 32693

Title: D (X) Delete  
Name: PARRISH, TERRY  
Address: P.O. BOX 82  
City-St-Zip: TRENTON, FL 32693

Title: V ( ) Delete  
Name: HARRELL, MITCH  
Address: 5280 NW 10TH ST  
City-St-Zip: BELL, FL 32619

Title: BM (X) Delete  
Name: PARRISH, TOMMY  
Address: 5350 SE 76TH TRAIL  
City-St-Zip: TRENTON, FL 32693

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: SMITH, SHANNON  
Address: 720 SW 105TH STREET  
City-St-Zip: TRENTON, FL 32693 US

Title: T (X) Change ( ) Addition  
Name: THOMAS, JULIE  
Address: 1380 NW 95TH STREET  
City-St-Zip: BRANFORD, FL 32008 US

Title: S (X) Change ( ) Addition  
Name: MOWER, KEITH  
Address: 7089 SW 37TH COURT  
City-St-Zip: TRENTON, FL 32693 US

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

Title: VP (X) Change ( ) Addition  
Name: HARRELL, MITCH  
Address: 5280 NW 10TH ST  
City-St-Zip: BELL, FL 32619 US

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: SHANNON SMITH

P

04/16/2009

Electronic Signature of Signing Officer or Director

Date