

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000003530

FILED  
May 29, 2005  
Secretary of State

**Entity Name:** PINECREST PIRANHAS BASEBALL CLUB, INC.

**Current Principal Place of Business:**

10580 S.W. 74 AVENUE  
PINECREST, FL 33156

**New Principal Place of Business:**

**Current Mailing Address:**

10580 S.W. 74 AVENUE  
PINECREST, FL 33156

**New Mailing Address:**

**FEI Number:** 04-3661529      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

SMITH, MARK D  
10580 SW 74 AVENUE  
PINECREST,, FL 33156      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:**

Title: PD      ( ) Delete  
Name: SMITH, MARK D  
Address: 10580 SW 74 AVE  
City-St-Zip: PINECREST, FL 33156

Title: VD      ( ) Delete  
Name: SMITH, MELISSA  
Address: 10580 SW 74 AVENUE  
City-St-Zip: PINECREST, FL 33156

Title: SD      ( ) Delete  
Name: LOBO, JOAN  
Address: 17430 SW 91 AVENUE  
City-St-Zip: MIAMI, FL 33157

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VD      (X) Change ( ) Addition  
Name: SMITH, RYAN  
Address: 10580 SW 74 AVENUE  
City-St-Zip: PINECREST, FL 33156

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 Section 119.07(3)(i), 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: MARK SMITH

PD

05/29/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date