2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 13, 2004
Secretary of State

DOCUMENT# N02000004020

Entity Name: STRIKE 3 UMPIRES ASSOCIATION INC

Current Principal Place of Business:

7243 NORTHBRIDGE BLVD
TAMPA, FL 33615

New Principal Place of Business:

Current Mailing Address:

7243 NORTHBRIDGE BLVD
TAMPA, FL 33615

New Mailing Address:

FEI Number: 06-1677067 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

RODRIGUEZ, JULIO
7243 NORTHBRIDGE BLVD
TAMPA, FL 33615

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: RODRIGUEZ, JULIO
Address: 7243 NORTHBRIDGE BLVD
City-St-Zip: TAMPA, FL 33615

Title: DIR ( ) Delete
Name: SANTIAGO, CHARLIE DIR
Address: 15516 LAKE GRACE DR
City-St-Zip: ODESSA, FL 33556

Title: DIR ( ) Delete
Name: RODRIGUEZ, LORRAINE DIR
Address: 7243 NORTHBRIDGE BLVD
City-St-Zip: TAMPA, FL 33615

Title: DIR ( ) Delete
Name: RODRIGUEZ, OSVALDO DIR
Address: 7243 NORTHBRIDGE BLVD
City-St-Zip: TAMPA, FL 33615

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:

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: JULIO RODRIGUEZ PRES 01/13/2004

Electronic Signature of Signing Officer or Director — Date