## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000001675

Entity Name: DIXIE COUNTY LITTLE LEAGUE, INC,

FILED Apr 30, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

P O BOX 2328

CROSS CITY, FL 32628

Current Mailing Address: New Mailing Address:

P O BOX 2328

CROSS CITY, FL 32628

FEI Number: 59-3075776 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:

BUZBEE, EVAN EDWARD, BROWNELL CR55A HWY 19 P.O. BOX 2328

OLD TOWN, FL 32680 US CROSS CITY, FL 32628 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: EDWARD BROWNELL 04/30/2004

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD ( ) Delete Title: PD (X) Change ( ) Addition

Name: BUZBEE, EVAN Name: BROWNELL, EDWARD

 Address:
 P O BOX 2328
 Address:
 P O BOX 2328

 City-St-Zip:
 CROSS CITY, FL 32628
 City-St-Zip:
 CROSS CITY, FL 32628

Title: VD ( ) Delete Title: VD (X) Change ( ) Addition

Name: GEATHERS, JOHNNY Name: FLOWERS, DANNY

Address: P O BOX 2328 Address: P O BOX 2328

City-St-Zip: CROSS CITY, FL 32628 City-St-Zip: CROSS CITY, FL 32628

 $\label{eq:title:sde} {\sf Title:} \qquad {\sf SD} \qquad (\ ) \, {\sf Delete} \qquad \qquad {\sf Title:} \qquad {\sf SD} \qquad ({\sf X}) \, {\sf Change} \, (\ ) \, {\sf Addition}$ 

 Name:
 FLOWERS, DIXIE
 Name:
 ROBERTS, CHRISTY

 Address:
 P O BOX 2328
 Address:
 P O BOX 2328

City-St-Zip: CROSS CITY, FL 32628 City-St-Zip: CROSS CITY, FL 32628

Title: TD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BROWNELL, SUSAN
 Name:

 Address:
 P O BOX 2328
 Address:

 City-St-Zip:
 CROSS CITY, FL 32628
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 LORD, CHERYL
 Name:

 Address:
 P O BOX 2328
 Address:

 City-St-Zip:
 CROSS CITY, FL 32628
 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: EDWARD BROWNELL PRES 04/30/2004