## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000001675

Entity Name: DIXIE COUNTY LITTLE LEAGUE, INC,

FILED May 20, 2005 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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P O BOX 2328

CROSS CITY, FL 32628

**Current Mailing Address: New Mailing Address:** 

P O BOX 2328

City-St-Zip:

CROSS CITY, FL 32628

FEI Number: 59-3075776 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:

EDWARD, BROWNELL MONTGOMERY, GARY

P.O. BOX 2328 P.O. BOX 2328

CROSS CITY, FL 32628 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: GARY MONTGOMERY 05/20/2005

> Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

CROSS CITY, FL 32628

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

( ) Delete (X) Change ( ) Addition

BROWNELL, EDWARD MONTGOMERY, GARY Name: Name:

P O BOX 2328 Address: P O BOX 2328 Address: City-St-Zip: CROSS CITY, FL 32628 City-St-Zip: CROSS CITY, FL 32628

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

FLOWERS, DANNY Name: Name:

Address: P O BOX 2328 Address: City-St-Zip: CROSS CITY, FL 32628 City-St-Zip:

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

ROBERTS, CHRISTY Name: HART, DAWN Name: Address: P O BOX 2328 Address: P O BOX 2328

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

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

BROWNELL, SUSAN Name: Name: LORD, CHERYL 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: ( ) Delete Title: (X) Change ( ) Addition

LORD, CHERYL SPURLIN, JODI Name: Name: P O BOX 2328 P O BOX 2328 Address: Address: CROSS CITY, FL 32628

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.

City-St-Zip:

SIGNATURE: CHERYL LORD TD 05/20/2005