


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2007 8:00 am
Secretary of State

01-16-2007 90211 037 ****61.25

DOCUMENT # N03000003250 1. Entity Name TRI - COUNTY CHALLENGER BASEBALL, INC.																																																																																																																													
Principal Place of Business 11439 PEMBROOK RUN ESTERO, FL 33928			Mailing Address 11439 PEMBROOK RUN ESTERO, FL 33928																																																																																																																										
2. Principal Place of Business - No P.O. Box # 9574 Lismore Lane		3. Mailing Address 9574 Lismore Lane																																																																																																																											
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																																																											
City & State Estero, FL		City & State Estero, FL		4. FEI Number 83-0353075																																																																																																																									
Zip 33928		Country Lee		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																																																																																									
6. Name and Address of Current Registered Agent BARRON, ALLAN B 11439 PEMBROOK RUN ESTERO, FL 33928			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 9574 Lismore Lane City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>																																																																																																																										
8. 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. I am familiar with, and accept the obligations of registered agent.																																																																																																																													
SIGNATURE <u><i>Allan Barron</i></u> Allan Barron President 1/10/07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																																																													
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees																																																																																																																									
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;">P BARRON, ALLAN</td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>11439 PEMBROOK RUN</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>ESTERO, FL 33928</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>V SCHMITTLER, CRAIG</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>6400 EMERALD PINES CIRCLE</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>FORT MYERS, FL 33912</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>T BARRON, DEBRA</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>11439 PEMBROOK RUN</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>ESTERO, FL 33928</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td>S JONES, TINA</td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>8119 ALMERIA</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>FORT MYERS, FL 33912</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> </div> <div style="width: 48%;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 65%;"></td> <td style="width: 20%; text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> <tr> <td>TITLE</td> <td></td> <td style="text-align: right;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td></td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td></td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td></td> <td></td> </tr> </table> </div> </div>						TITLE	P BARRON, ALLAN	<input type="checkbox"/> Delete	NAME	11439 PEMBROOK RUN		STREET ADDRESS	ESTERO, FL 33928		CITY-ST-ZIP			TITLE	V SCHMITTLER, CRAIG	<input type="checkbox"/> Delete	NAME	6400 EMERALD PINES CIRCLE		STREET ADDRESS	FORT MYERS, FL 33912		CITY-ST-ZIP			TITLE	T BARRON, DEBRA	<input type="checkbox"/> Delete	NAME	11439 PEMBROOK RUN		STREET ADDRESS	ESTERO, FL 33928		CITY-ST-ZIP			TITLE	S JONES, TINA	<input type="checkbox"/> Delete	NAME	8119 ALMERIA		STREET ADDRESS	FORT MYERS, FL 33912		CITY-ST-ZIP			TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Delete	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP			TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME			STREET ADDRESS			CITY-ST-ZIP		
TITLE	P BARRON, ALLAN	<input type="checkbox"/> Delete																																																																																																																											
NAME	11439 PEMBROOK RUN																																																																																																																												
STREET ADDRESS	ESTERO, FL 33928																																																																																																																												
CITY-ST-ZIP																																																																																																																													
TITLE	V SCHMITTLER, CRAIG	<input type="checkbox"/> Delete																																																																																																																											
NAME	6400 EMERALD PINES CIRCLE																																																																																																																												
STREET ADDRESS	FORT MYERS, FL 33912																																																																																																																												
CITY-ST-ZIP																																																																																																																													
TITLE	T BARRON, DEBRA	<input type="checkbox"/> Delete																																																																																																																											
NAME	11439 PEMBROOK RUN																																																																																																																												
STREET ADDRESS	ESTERO, FL 33928																																																																																																																												
CITY-ST-ZIP																																																																																																																													
TITLE	S JONES, TINA	<input type="checkbox"/> Delete																																																																																																																											
NAME	8119 ALMERIA																																																																																																																												
STREET ADDRESS	FORT MYERS, FL 33912																																																																																																																												
CITY-ST-ZIP																																																																																																																													
TITLE		<input type="checkbox"/> Delete																																																																																																																											
NAME																																																																																																																													
STREET ADDRESS																																																																																																																													
CITY-ST-ZIP																																																																																																																													
TITLE		<input type="checkbox"/> Delete																																																																																																																											
NAME																																																																																																																													
STREET ADDRESS																																																																																																																													
CITY-ST-ZIP																																																																																																																													
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																											
NAME																																																																																																																													
STREET ADDRESS																																																																																																																													
CITY-ST-ZIP																																																																																																																													
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																											
NAME																																																																																																																													
STREET ADDRESS																																																																																																																													
CITY-ST-ZIP																																																																																																																													
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																											
NAME																																																																																																																													
STREET ADDRESS																																																																																																																													
CITY-ST-ZIP																																																																																																																													
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition																																																																																																																											
NAME																																																																																																																													
STREET ADDRESS																																																																																																																													
CITY-ST-ZIP																																																																																																																													
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.																																																																																																																													
SIGNATURE: <u><i>Allan Barron</i></u> Allan Barron 1/10/07 239 390-1747 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																																																													