

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003917

FILED
Aug 01, 2007
Secretary of State

Entity Name: PREDATOR BASEBALL, INC.

Current Principal Place of Business:

9327 WELLINGTON PARK CIRCLE
TAMPA, FL 33647 US

New Principal Place of Business:

Current Mailing Address:

9327 WELLINGTON PARK CIRCLE
TAMPA, FL 33647 US

New Mailing Address:

FEI Number: 58-2676317 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:

SPIEGEL & UTRERA, P.A.
1840 SOUTHWEST 22 SREET, 4TH FLOOR
MIAMI, FL 33145 US

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: DPT () Delete
Name: LAWSON, MATTHEW A
Address: 9327 WELLINGTON PARK CIRCLE
City-St-Zip: TAMPA, FL 33647 US

Title: VP () Delete
Name: PAYNE, JACK
Address: 5915 BRICKLEBERRY LANE
City-St-Zip: ZEPHYRHILLS, FL 33541 US

Title: SD () Delete
Name: JARRELL, JAY
Address: 16305 HEATHROW DRIVE
City-St-Zip: TAMPA, FL 33647 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: WOODY, CHRIS
Address: 9302 HERITAGE OAK COURT
City-St-Zip: TAMPA, FL 33647 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: MATTHEW LAWSON

Electronic Signature of Signing Officer or Director

DPT

08/01/2007

_____ Date