2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003961

Address:

City-St-Zip:

GAINESVILLE, FL 32607

Entity Name: FLORIDA SELECT BASEBALL ASSOCIATION, INC.

FILED Apr 29, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 221 CANTER CLUB TRAIL LONGWOOD, FL 32779 **Current Mailing Address: New Mailing Address:** 221 CANTER CLUB TRAIL LONGWOOD, FL 32779 FEI Number: 59-3594298 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: VEECH, R KENT 221 CANTER CLUB TRAIL LONGWOOD, FL 32779 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition VEECH, R KENT Name: Name: 221 CANTER CLUB TRAIL Address: Address: City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: Title: HC Title: () Change () Addition () Delete Name: MAIN, DIRK Name: Address: 521 RITA CT Address: City-St-Zip: DELTONA, FL 32725 City-St-Zip: Title: PCC (X) Delete Title: () Change () Addition STRICKLAND, REX Name: Name: 203 ATHERSTONE CT Address: Address: City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: Title: BC (X) Delete Title: () Change () Addition MCCLOSKEY, PETE Name: Name: 208 CUMBERLAND TRAIL Address: Address: City-St-Zip: LONGWOOD, FL 32779 City-St-Zip: Title: Title: () Delete () Change () Addition ELLINGTON, DONNIE Name: Name: 10008 SW 38TH PLACE

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.

Address:

City-St-Zip:

SIGNATURE: R KENT VEECH BM 04/29/2004