

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005575

FILED
Jan 06, 2010
Secretary of State

Entity Name: THE LEMON BAY LEAGUE, INC.

Current Principal Place of Business:

244 MARK TWAIN LANE
ROTONDA, FL 33947

New Principal Place of Business:

Current Mailing Address:

PO BOX 801
ENGLEWOOD, FL 34295

New Mailing Address:

FEI Number: 02-0603856

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ARBOUR, BARBARA C
12355 COLE AVE
PORT CHARLOTTE, FL 33981 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: D
Name: MINNICH, THOMAS
Address: 1819 WHISPERING PINES BLVD
City-St-Zip: ENGLEWOOD, FL 34223

Title: P
Name: MOORE, THOMAS
Address: 1936 GEORGIA AVE
City-St-Zip: ENGLEWOOD, FL 34224

Title: D
Name: SWEPSTON, THOMAS
Address: 30 GOLFVIEW DR
City-St-Zip: ENGLEWOOD, FL 34223

Title: T
Name: ARBOUR, BARBARA
Address: 12355 COLE AVE
City-St-Zip: PORT CHARLOTTE, FL 33981

Title: D
Name: COY, WILLARD DR
Address: 244 MARK TWAIN LN
City-St-Zip: ROTONDA WEST, FL 33947

Title: D
Name: BOSSMAN, BRENDA
Address: 8 AMBERJACK PL
City-St-Zip: PLACIDA, FL 33946

I hereby 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 all other like empowered.

SIGNATURE: BARBARA C ARBOUR

T

01/06/2010

Electronic Signature of Signing Officer or Director

Date