

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010843

FILED  
Jan 17, 2005  
Secretary of State

**Entity Name:** HOLLYWOOD KNIGHTS TRAVEL BASEBALL, INC.

**Current Principal Place of Business:**

10326 SW 50 CT  
COOPER CITY, FL 33328

**New Principal Place of Business:**

**Current Mailing Address:**

10326 SW 50 CT  
COOPER CITY, FL 33328

**New Mailing Address:**

**FEI Number:** 20-0577918

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HEALEY, JOSEPH  
10326 SW 50 CT  
COOPER CITY, FL 33328 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: P ( ) Delete  
Name: HEALEY, JOSEPH  
Address: 10326 SW 50 CT  
City-St-Zip: COOPER CITY, FL 33328

Title: V ( ) Delete  
Name: STAMPLER, HARRY  
Address: 5800 PEPPERTREE CIRCLE W  
City-St-Zip: DAVIE, FL 33314

Title: S ( ) Delete  
Name: BEECHER, EDDIE  
Address: 5522 SW 114 AVE  
City-St-Zip: COOPER CITY, FL 33330

Title: T ( ) Delete  
Name: HEALEY, KATHLEEN  
Address: 10326 SW 50 CT  
City-St-Zip: COOPER CITY, FL 33328

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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.

**SIGNATURE:** JOSEPH J. HEALEY

PRES

01/17/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date