

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 30, 2004  
Secretary of State**

DOCUMENT# N03000011071

Entity Name: MYRTLE GROVE DIXIE YOUTH BASEBALL INC

**Current Principal Place of Business:**

99 NORTH 61ST AVE  
PENSACOLA, FL 32506

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 3202  
PENSACOLA, FL 32516

**New Mailing Address:**

FEI Number: 31-1709400      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

RUSCHEL, VICKI  
520 LONG LAKE DR  
PENSACOLA, FL 32506      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: SCAPECCHI, LARRY  
Address: 312 N 61ST AVE  
City-St-Zip: PENSACOLA, FL 32506

Title: VP      ( ) Delete  
Name: CHILDERS, VINCE  
Address: 7396 ESTHER ST  
City-St-Zip: PENSACOLA, FL 32506

Title: TR      ( ) Delete  
Name: RUSCHEL, VICKI  
Address: 520 LONG LAKE DR  
City-St-Zip: PENSACOLA, FL 32506

Title: SEC      ( ) Delete  
Name: ADAMS, JENINE  
Address: 13020 HARTUNG AVE  
City-St-Zip: PENSACOLA, FL 32506

Title: SA      ( ) Delete  
Name: THORSEN, JON  
Address: 501 N 70TH AVE  
City-St-Zip: PENSACOLA, FL 32506

**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:

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: VICKI L RUSCHEL

TD

03/30/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date