

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 05 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N03677 (4)

1. Corporation Name  
PINECREST LITTLE LEAGUE, INC.



Principal Place of Business Mailing Address  
S.R. 39 SOUTH P.O. BOX 733 LITHIA FL 33547  
S.R. 39 SOUTH P.O. BOX 733 LITHIA FL 33547

3. Date Incorporated or Qualified 06/14/1984  
3a. Date of Last Report 03/16/1996

2. Principal Place of Business 2a. Mailing Address

21 9312 SR 39 South 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Lithia FL 28 City & State

24 33547 25 Country 29 30 Country

4. FEI Number 59-2387488  
Applied For Not Applicable

5. Certificate of Status Desired  \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TAYLOR, GARY A  
10005 S BRYANT RD  
LITHIA FL 33547

81 Name John W. PARKS  
82 Street Address (P.O. Box Number is Not Acceptable)  
83 724 Wendel Av  
84 City Lithia FL 85 Zip Code 33545

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE: John W. Parks President 1-11-97  
(NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	VP	<input checked="" type="checkbox"/> DELETE
NAME	SUMNER, ROB	
STREET ADDRESS	8110 EDISON RD.	
CITY-ST-ZIP	LITHIA FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	WEBB, PATRICIA	
STREET ADDRESS	4451 W. KEYSVILLE RD	
CITY-ST-ZIP	PLANT CITY FL 33567	
TITLE	T	<input type="checkbox"/> DELETE
NAME	PHILLIPS, KAREN	
STREET ADDRESS	402 ADAMS RD	
CITY-ST-ZIP	MULBERRY FL 33860	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	SUMNER, SANDY	
STREET ADDRESS	8110 EDISON RD.	
CITY-ST-ZIP	LITHIA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	PARKS, BETTY	
STREET ADDRESS	724 WENDEL AVE	
CITY-ST-ZIP	MULBERRY FL 33860	
TITLE	D	<input type="checkbox"/> DELETE
NAME	PHILLIPS, DARYL	
STREET ADDRESS	402 ADAMS RD	
CITY-ST-ZIP	MULBERRY FL 33860	

1.1 TITLE	D.P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Danny Webb	
1.3 STREET ADDRESS	4451 W. Keysville Rd	
1.4 CITY-ST-ZIP	Plant City, FL 33567	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Audrey White	
4.3 STREET ADDRESS	3319 Cindi Ln	
4.4 CITY-ST-ZIP	Lithia, FL 33547	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: John W. Parks 1-11-97 813681-4028

CR2E037 (9/96)