

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03677

FILED
Jul 19, 2009
Secretary of State

Entity Name: PINECREST LITTLE LEAGUE, INC.

Current Principal Place of Business:

9312 S.R. 39 SOUTH
P.O. BOX 733
LITHIA, FL 33547 US

New Principal Place of Business:

9312 S.R. 39 SOUTH
LITHIA, FL 33547 US

Current Mailing Address:

S.R. 39 SOUTH
P.O. BOX 733
LITHIA, FL 33547

New Mailing Address:

PO BOX 733
LITHIA, FL 33547 US

FEI Number: 59-2387488 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

DEESE, TEDDY
3343 NICHOLS RD
LITHIA, FL 33547 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: T () Delete
Name: KOSS, ROBIN
Address: 8840 CAREY RD
City-St-Zip: LITHIA, FL 33547

Title: VP () Delete
Name: DAVIS, TEDDY
Address: 6510 DURANT RD.
City-St-Zip: DURANT, FL 33530

Title: VP () Delete
Name: MORGAN, LAMAR
Address: P O BOX 78
City-St-Zip: LITHIA, FL 33547

Title: S () Delete
Name: GREENWOOD, BRENDA
Address: 14911 LONE PINE HOLLOW HWY
City-St-Zip: LITHIA, FL 33547

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TREA (X) Change () Addition
Name: STOSKOPF, JEFF
Address: 1402 STEPHENS OAK CT.
City-St-Zip: LITHIA, FL 33567 US

Title: SEC (X) Change () Addition
Name: CORBETT, CHARLOTTE
Address: 3933 KEYSVILLE RD
City-St-Zip: LITHIA, FL 33547 US

Title: VP (X) Change () Addition
Name: MORGAN, LAMAR
Address: P O BOX 78
City-St-Zip: LITHIA, FL 33547 US

Title: WAYS (X) Change () Addition
Name: WEST, ANGELA
Address: 2315 HENDRY RD
City-St-Zip: LITHIA, FL 33547 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: ANGELA WEST

WAYS

07/19/2009

Electronic Signature of Signing Officer or Director

Date