2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N0400000136

Entity Name: MURDOCK LITTLE LEAGUE, INC.

FILED Apr 09, 2009 Secretary of State

1185 O'DONNELL BLVD NORTH REGIONAL SPORT PARK PORT CHARLOTTE, FL 33953

Current Mailing Address: New Mailing Address:

P.O. BOX 380696 MURDOCK, FL 33938

FEI Number: 81-0632666 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

RAFTER, ROBERT HEPNER, JENNY 20577 TAPPAN ZEE HEPNER JENNY 1185 O'DONNELL BLVD

PORT CHARLOTTE, FL 33952 US NORTH REGIONAL SPORT PARK PORT CHARLOTTE, FL 33953 US

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: JENNY HEPNER 04/09/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Fitle:
 VP
 () Delete
 Title:
 P
 (X) Change () Addition

 Name:
 GARDER, KEIR
 Name:
 HEPNER, JENNY

 Name:
 GARDER, KEIR
 Name:
 HEPNER, JENNY

 Address:
 P.O. BOX 380696
 Address:
 1185 O'DONNELL BLVD

 City-St-Zip:
 MURDOCK, FL 33938
 City-St-Zip:
 PT CHARLOTTE, FL 33953

Title: P (X) Delete Title: () Change () Addition

 Name:
 RAFTER, ROBERT
 Name:

 Address:
 P.O. BOX 380696
 Address:

 City-St-Zip:
 MURDOCK, FL 33938
 City-St-Zip:

Title: T () Delete Title: () Change () Addition

 Name:
 JURISKO, JENNIFER
 Name:

 Address:
 P.O. BOX 380696
 Address:

 City-St-Zip:
 MURDOCK, FL 33938
 City-St-Zip:

 $\label{eq:time_state} {\sf Title:} \qquad \qquad {\sf S} \qquad \qquad {\sf (X) \ Delete} \qquad \qquad {\sf Title:} \qquad \qquad {\sf (\) \ Change \ (\) \ Addition}$

 Name:
 JURSKO, JENNIFER
 Name:

 Address:
 P.O. BOX 380696
 Address:

 City-St-Zip:
 MURDOCK, FL 33938
 City-St-Zip:

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: JENNIFER JURISKO T 04/09/2009