

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 24, 2009
Secretary of State

DOCUMENT# N04000000651

Entity Name: THE EVERGLADES BASEBALL BOOSTER CLUB, INC.**Current Principal Place of Business:**17100 SW 48 COURT
MIRAMAR, FL 33027**New Principal Place of Business:**4987 S.W. 167TH AVE.
MIRAMAR, FL 33027**Current Mailing Address:**15960 SW 16 ST
PEMBROKE PINES, FL 33027**New Mailing Address:**4987 S.W. 167TH AVE.
MIRAMAR, FL 33027**FEI Number:** 04-3783994**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**CABALLERO, LUIS
2213 NW 208 TERR
PEMBROKE PINES, FL 33029 US**Name and Address of New Registered Agent:**GARCIA, EDEL
4987 S.W. 167TH AVE.
MIRAMAR, FL 33027 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: EDEL GARCIA

09/24/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CABALLERO, LUIS
Address: 2213 NW 208 TERR
City-St-Zip: PEMBROKE PINES, FL 33029

Title: VP () Delete
Name: RAMOS, ASDRUBAL
Address: 15767 SW 41 STREET
City-St-Zip: MIRAMAR, FL 33027

Title: T () Delete
Name: RODRIGUEZ, NANNETTE
Address: 15960 SW 16 STREET
City-St-Zip: PEMBROKE PINES, FL 33027

Title: S () Delete
Name: GARCIA, EDEL
Address: 4987 SW 167 AVENUE
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GARCIA, EDEL
Address: 4987 S.W. 167TH AVE.
City-St-Zip: MIRAMAR, FL 33027

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

Title: T (X) Change () Addition
Name: COLON, MARTA
Address: 2835 S.W. 177TH TERRACE
City-St-Zip: MIRAMAR, FL 33029

Title: S (X) Change () Addition
Name: DIAZ, LORRETTA
Address: 16340 S.W. 51ST STREET
City-St-Zip: MIRAMAR, FL 33027

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: EDEL GARCIA

P

09/24/2009

Electronic Signature of Signing Officer or Director

Date