


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90107 023 ****61.25

DOCUMENT # N04000007692	
1. Entity Name PONY EXPRESS YOUTH BASEBALL, INC.	

Principal Place of Business 1211 N. WESTSHORE BOULEVARD SUITE 309 TAMPA, FL 33607 US	Mailing Address P.O. BOX 22131 TAMPA, FL 33622 US
--	---

2. Principal Place of Business 16505 MILLAN DE AVILA	3. Mailing Address SAME
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State Tampa, FL	City & State
Zip 33613	Country USA



02162006 Chg-NP CR2E037 (11/05)

4. FEI Number NOT APPLICABLE	Applied For <input type="checkbox"/> Not Applicable
--	--

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
---	---------------------------------------

6. Name and Address of Current Registered Agent GREENWOOD, SCOTT 1211 N. WESTSHORE BOULEVARD SUITE 309 TAMPA, FL 33607	
--	--

7. Name and Address of New Registered Agent	
Name JAMES CIOCIA	
Street Address (P.O. Box Number is Not Acceptable) 18711 PEPPER PIKE	
City LUTZ	FL Zip Code 33558

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE 	SIGNATURE 	DATE 2/22/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
---	---	------------------------------------	--

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P FRAGNITO, GERARD <input checked="" type="checkbox"/> Delete 1211 N. WESTSHORE BOULEVARD, STE 309 TAMPA, FL 33607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP CIOCIA, JAMES <input type="checkbox"/> Delete 1211 N. WESTSHORE BOULEVARD, STE 309 TAMPA, FL 33607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DUNN, DANIEL <input type="checkbox"/> Delete 1211 N. WESTSHORE BOULEVARD, STE 309 TAMPA, FL 33607
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Fragnito, Gerard <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition (Vice President)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Stevens, Joel (PRESIDENT) <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 16505 Millan de Avila Tampa, FL 33613
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: 	2/22/06	813-264-2555
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		