2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2005
Secretary of State

DOCUMENT# N04000009160

Entity Name: CORAL GLADES BASEBALL BOOSTER CLUB, INC.

Current Principal Place of Business:

2700 SPORTSPLEX DR
CORAL SPRINGS, FL 33065

New Principal Place of Business:

Current Mailing Address:

2700 SPORTSPLEX DR
CORAL SPRINGS, FL 33065

New Mailing Address:

FEI Number: 20-1708848 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SAVASTA, MICHAEL
2700 SPORTSPLEX DR
CORAL SPRINGS, FL 33065 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: P ( ) Delete
Name: SAVASTA, MICHAEL
Address: 2700 SPORTSPLEX DR
City-St-Zip: CORAL SPRINGS, FL 33065

Title: VP ( ) Delete
Name: KNOLL, JEFF
Address: 11142 NW 21 ST
City-St-Zip: CORAL SPRINGS, FL 33071

Title: T ( ) Delete
Name: BALL, KAREN
Address: 11858 NW 11 PLACE
City-St-Zip: CORAL SPRINGS, FL 33071

Title: S ( ) Delete
Name: MINTZER, BARRY
Address: 12120 EAGLE TRACE BLVD NORTH
City-St-Zip: CORAL SPRINGS, FL 33071

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL SAVASTA PRES 03/16/2005

Electronic Signature of Signing Officer or Director — Date