2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N05000000027

FILED May 27, 2008 Secretary of State

Entity Name: AUBURNDALE LITTLE LEAGUE BASEBALL, INC.

Current Principal Place of Business: New Principal Place of Business:

115 LAKEVIEW DR. 209 MAIN STREET

AUBURNDALE, FL 33823 AUBURNDALE, FL 33823

Current Mailing Address: New Mailing Address:

P.O. BOX 981

AUBURNDALE, FL 33823

FEI Number: 59-2323360 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:

ISON, STACY M BRAUCKMULLER, RICHARD 116 PATTERSON DR. 209 MAIN STREET

AUBURNDALE, FL 33823 US AUBURNDALE, FL 33823 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: RICHARD BRAUCKMULLER 05/27/2008

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition Name: SHERROUSE, MICHAELS Name: BRAUCKMULLER, RICHARD Address: 115 LAKEVIEW DR. Address: 209 MAIN STREET

City-St-Zip: AUBURNDALE, FL 33823 City-St-Zip: AUBURNDALE, FL 33823

Title: SD () Delete Title: SD (X) Change () Addition Name: ISON, STACEY M Name: CONE, BEVERLY

Address: 116 PATTERSON DR. Address: PO BOX 981
City-St-Zip: AUBURNDALE, FL 33823 City-St-Zip: AUBURNDALE, FL 33823

Title: TD () Delete Title: TD (X) Change () Addition Name: COLLINS, TIANA C Name: GRINER, CARRIE L

Address: 1516 AUBURN OAKS CIRCLE Address: 1054 ARIANA AVE
City-St-Zip: AUBURNDALE, FL 33823 City-St-Zip: AUBURNDALE, FL 33823

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: CARRIE L. GRINER TD 05/27/2008