2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N05000000027

T FILED

Aug 20, 2009

Secretary of State

Entity Name: AUBURNDALE LITTLE LEAGUE BASEBALL, INC.

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

209 MAIN STREET 115 LAKEVIEW DR

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:

BRAUCKMULLER, RICHARD SHERROUSE, SHAWN 209 MAIN STREET SHERROUSE, SHAWN 115 LAKEVIEW DR.

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: RMARTIN852@TAMPABAY.RR.COM 08/20/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: PD () Delete Title: PD (X) Change () Addition

 Name:
 BRAUCKMULLER, RICHARD
 Name:
 SHERROUSE, SHAWN

 Address:
 209 MAIN STREET
 Address:
 115 LAKEVIEW DRIVE

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

Title: SD () Delete Title: SD (X) Change () Addition Name: CONE, BEVERLY Name: WEBB, DAWN

Address: PO BOX 981 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: GRINER, CARRIE L Name: MARTIN, RENEE A

Address: 1054 ARIANA AVE Address: 272 MAGNETA LOOP
City-St-Zip: AUBURNDALE, FL 33823
City-St-Zip: AUBURNDALE, FL 33823

Title: VD () Change (X) Addition

 Name:
 Name:
 PIGG, GENE

 Address:
 Address:
 P.O. BOX 981

City-St-Zip: 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: RENEE MARTIN TD 08/20/2009