

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000004261

FILED  
Jan 18, 2008  
Secretary of State

**Entity Name:** CORAL SPRINGS DIAMONDS TRAVEL BASEBALL CLUB, INC.

**Current Principal Place of Business:**

6157 NW 53RD CIRCLE  
CORAL SPRINGS, FL 33067 US

**New Principal Place of Business:**

**Current Mailing Address:**

6157 NW 53RD CIRCLE  
CORAL SPRINGS, FL 33067 US

**New Mailing Address:**

**FEI Number:** 20-4320782

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

AUFENANGER, DAWN ESQ.  
2770 N UNIVERSITY DRIVE  
CORAL SPRINGS, FL 33065 US

**Name and Address of New Registered Agent:**

AUFENANGER, DAWN ESQ.  
1440 CORAL RIDGE DRIVE #293  
CORAL SPRINGS, FL 33071 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: DAWN M AUFENANGER

01/18/2008

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: KOPEC, JOHN JR.  
Address: 6157 NW 53RD CIRCLE  
City-St-Zip: CORAL SPRINGS, FL 33067 US

Title: VP ( ) Delete  
Name: MAYO, KEITH  
Address: 5606 NW 122ND TERRACE  
City-St-Zip: CORAL SPRINGS, FL 33076 US

Title: T ( ) Delete  
Name: MAYO, TERRI  
Address: 5606 NW 122ND TERRACE  
City-St-Zip: CORAL SPRINGS, FL 33076 US

Title: S ( ) Delete  
Name: KOPEC, TAMMI  
Address: 6157 NW 53RD CIRCLE  
City-St-Zip: CORAL SPRINGS, FL 33067

**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 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: KEITH MAYO

VP

01/18/2008

Electronic Signature of Signing Officer or Director

Date