2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 22, 2008
Secretary of State

DOCUMENT# N05000009998

Entity Name: NORTH TAMPA LEAGUERETTES, INC.

Current Principal Place of Business:

1902 SOUTH VILLAGE AVENUE
TAMPA, FL 33618

New Principal Place of Business:

1902 SOUTH VILLAGE AVENUE
TAMPA, FL 33612

Current Mailing Address:

P.O. BOX 273047
TAMPA, FL 33688

New Mailing Address:

FEI Number: 20-3508995 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

SMITH, JULIE
15003 ALBRIGHT DR
TAMPA, FL 33613 US

Name and Address of New Registered Agent:

FLANAGAN, LARUEN
13920 FLETCHERS MILL DRIVE
TAMPA, FL 33613 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: LAUREN FLANAGAN 01/22/2008
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: WINN, ANTHONY
Address: 8505 TWIN LAKES BLVD
City-St-Zip: TAMPA, FL 33613

Title: V ( ) Delete
Name: GAMBINO, BOBBY
Address: 13920 FLETCHER MILL DRIVE
City-St-Zip: TAMPA, FL 33613

Title: T ( ) Delete
Name: FLANAGAN, LAUREN
Address: 13920 FLETCHERS MILL DRIVE
City-St-Zip: TAMPA, FL 33613

Title: S ( ) Delete
Name: SCRUGGS, DEB
Address: 10303 NEWPORT CIRCLE
City-St-Zip: TAMPA, FL 33612

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: LAUREN FLANAGAN T 01/22/2008
Electronic Signature of Signing Officer or Director Date