

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000339

FILED
Apr 29, 2009
Secretary of State

Entity Name: LAFAYETTE BABE RUTH, INC.

Current Principal Place of Business:

3170 NW CR 53
MAYO, FL 32066

New Principal Place of Business:

Current Mailing Address:

3170 NW CR 53
MAYO, FL 32066

New Mailing Address:

P O BOX 862
MAYO, FL 32066

FEI Number: 20-4146931

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PERRY, CHAN
788 NE CR 343
MAYO, FL 32066 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: PERRY, CHAN
Address: 788 NE CR 353
City-St-Zip: MAYO, FL 32066

Title: V () Delete
Name: LAND, MONICA
Address: 101 SE LAKEVIEW DRIVE
City-St-Zip: BRANFORD, FL 32008

Title: T () Delete
Name: BRASWELL, HOLLY
Address: 2264 NE CIR 400
City-St-Zip: MAYO, FL 32066

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: T (X) Change () Addition
Name: BRASWELL, HOLLY
Address: 2269 NE CR 400
City-St-Zip: MAYO, FL 32066

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: HOLLY T. BRASWELL

T

04/29/2009

Electronic Signature of Signing Officer or Director

Date