

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000000616

FILED
Jan 25, 2011
Secretary of State

Entity Name: ROTARY SPORTSPLEX - CAL RIPKEN BASEBALL ASSOCIATION, INC.

Current Principal Place of Business:

610 SE 17TH STREET
OCALA, FL 34471

New Principal Place of Business:

5220 SE MARICAMP ROAD
OCALA, FL 34480

Current Mailing Address:

PO BOX 4885
OCALA, FL 34478

New Mailing Address:

PO BOX 4552
OCALA, FL 34478

FEI Number: 20-4367106

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VANDEVEN, HARVEY
4260 NE 35 STREET
OCALA, FL 34479 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: D
Name: VANDEVEN, HARVEY
Address: 4260 NE 35TH STREET
City-St-Zip: Ocala, FL 34479

Title: P
Name: SALAMONE, JEFF
Address: PO BOX 4552
City-St-Zip: Ocala, FL 34478

Title: TRE
Name: BOONE, KIRK
Address: PO BOX 4552
City-St-Zip: Ocala, FL 34478

Title: SEC
Name: SALAMONE, KASEY
Address: PO BOX 4552
City-St-Zip: Ocala, FL 34478

Title: VP
Name: FABIAN, ERIC
Address: PO BOX 4552
City-St-Zip: Ocala, FL 34478

I hereby 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 all other like empowered.

SIGNATURE: KIRK BOONE

TRE

01/25/2011

Electronic Signature of Signing Officer or Director

Date