2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2009
Secretary of State

DOCUMENT# N06000005851

Entity Name: C.H.S. BASE BALL CLUB CORP.

Current Principal Place of Business:

660 CHARLOTTE ST
STE 5
PUNTA GORDA, FL 33950

New Principal Place of Business:

Current Mailing Address:

660 CHARLOTTE ST
STE 5
PUNTA GORDA, FL 33950

New Mailing Address:

405 SCARLET SAGE
PUNTA GORDA, FL 33955

FEI Number: 20-4975559 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

POLK, CHARLES M III
660 CHARLOTTE ST
STE 5
PUNTA GORDA, FL 33950 US

Name and Address of New Registered Agent:

KLOSSNER, WILLIAM W
405 SCARLET SAGE
PUNTA GORDA, FL 33955 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: WILLIAM W. KLOSSNER 04/30/2009
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: BEISNER, BRYAN
Address: 1072 SEA CREST DR
City-St-Zip: PORT CHARLOTTE, FL 33948

Title: VP ( ) Delete
Name: KLOSSNER, WILLIAM
Address: 405 SCARLET SAGE
City-St-Zip: PUNTA GORDA, FL 33950

Title: TREA (X) Delete
Name: POLK, CHARLES M III
Address: 660 CHARLOTTE ST
City-St-Zip: PUNTA GORDA, FL 33950

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: TREA (X) Change ( ) Addition
Name: KLOSSNER, WILLIAM
Address: 405 SCARLET SAGE
City-St-Zip: PUNTA GORDA, FL 33950

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: WILLIAM W. KLOSSNER TREA 04/30/2009
Electronic Signature of Signing Officer or Director Date