

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N06000008587

1. Entity Name
NORTHWEST LITTLE LEAGUE OF TAMPA, INC.



FILED

08 SEP 15 PM 12:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Principal Place of Business
6402 N. OCCIDENT AVE.
TAMPA, FL 33614 US

Mailing Address
4409 W CLIFTON ST.
TAMPA, FL 33614 US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

09102008 Chg-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number
06-1649378

Applied For
Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JONES, CRISTINA
4409 W CLIFTON ST.
TAMPA, FL 33614

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

M. Cristina Jones - M. CRISTINA JONES

9/10/08

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE P ☒ Delete
NAME JONES, CRISTINA
STREET ADDRESS 4409 W. CLIFTON ST
CITY-ST-ZIP TAMPA, FL 33614

TITLE VP ☒ Delete
NAME SWEDER, DAVE
STREET ADDRESS 19025 CHEMILLE DR.
CITY-ST-ZIP LUTZ, FL 33549

TITLE TREA ☐ Delete
NAME BUTLER, JIMMIE
STREET ADDRESS 1802 W CLEVELAND ST
CITY-ST-ZIP TAMPA, FL 33606

TITLE SEC ☒ Delete
NAME DURAN, CLARIBEL
STREET ADDRESS 4505 W IDLEWILD AVE.
CITY-ST-ZIP TAMPA, FL 33614

TITLE SBVP ☒ Delete
NAME BISCARDI, CHRISTINE
STREET ADDRESS 8534 LAZY RIVER DR
CITY-ST-ZIP TAMPA, FL 33617

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE President ☒ Change ☐ Addition
NAME Danny Rodriguez
STREET ADDRESS 4415 W. KNOX ST.
CITY-ST-ZIP Tampa FL 33614

TITLE V.P. ☒ Change ☐ Addition
NAME J.M. Pardo
STREET ADDRESS P.O. Box 152685
CITY-ST-ZIP Tampa FL 33684

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP
400136102964
09/18/08--01043--006 **\$61.25

TITLE Sec. ☒ Change ☐ Addition
NAME Erica Rodriguez
STREET ADDRESS 4415 W. KNOX ST.
CITY-ST-ZIP Tampa FL 33614

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Jimmie Butler

9/10/08

(813) 254-6575

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4116 00