

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005740

FILED
Jan 13, 2008
Secretary of State

Entity Name: LAKE WORTH HURRICANES TRAVEL BASEBALL, INC.

Current Principal Place of Business:

4129 FOSS ROAD
LAKE WORTH, FL 33461 US

New Principal Place of Business:

Current Mailing Address:

4129 FOSS ROAD
LAKE WORTH, FL 33461 US

New Mailing Address:

FEI Number: 26-0323225

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROACH, RAYMOND
4129 FOSS ROAD
LAKE WORTH, FL 33461 US

Name and Address of New Registered Agent:

ROACH, RAYMOND
4129 FOSS ROAD
LAKE WORTH, FL 33461 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:

01/13/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ROACH, RAYMOND
Address: 4129 FOSS ROAD
City-St-Zip: LAKE WORTH, FL 33461

Title: VP () Delete
Name: SOTOMAYOR, EDWIN
Address: 4936 SARATOGA ROAD
City-St-Zip: WEST PALM BEACH, FL 33415

Title: VP/S () Delete
Name: MARTINEZ, JENNIFER
Address: 5222 SARATOGA RD
City-St-Zip: WEST PALM BEACH, FL 33463

Title: T () Delete
Name: ROACH, GRACE
Address: 4129 FOSS ROAD
City-St-Zip: LAKE WORTH, FL 33461

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: VP/S (X) Change () Addition
Name: MARTINEZ, JENNIFER
Address: 5222 CANOE BEND DR
City-St-Zip: LAKE WORTH, FL 33463

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: GRACE ROACH

T

01/13/2008

Electronic Signature of Signing Officer or Director

Date