

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jun 15, 2010
Secretary of State

DOCUMENT# N07000006391

Entity Name: NORTH PORT DIAMOND CATS BASEBALL CLUB, INC.**Current Principal Place of Business:**3971 JUNCTION STREET
NORTH PORT, FL 34288**New Principal Place of Business:****Current Mailing Address:**3971 JUNCTION STREET
NORTH PORT, FL 34288**New Mailing Address:****FEI Number:** 26-0431678**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**STURZ, BRYANT
3971 JUNCTION STREET
NORTH PORT, FL 34288 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:** PD
Name: JONES, RICHARD R
Address: 3535 MONTCLAIR CIRCLE
City-St-Zip: NORTH PORT, FL 34287**Title:** VD
Name: LUNDGREN, DOLORES S
Address: 4287 KESSLER TERRACE
City-St-Zip: NORTH PORT, FL 34287**Title:** SD
Name: LODGE, JACKIE
Address: 7435 BLUTTER ROAD
City-St-Zip: NORTH PORT, FL 34291**Title:** TD
Name: MURRAY, TRICIA S
Address: 6676 N. BISCAYNE DRIVE
City-St-Zip: NORTH PORT, FL 34291**Title:** D
Name: SABORSE, STEVE
Address: 3474 PARADE TERRACE
City-St-Zip: NORTH PORT, FL 34286

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: TRICIA S. MURRAY

TD

06/15/2010

Electronic Signature of Signing Officer or Director

Date