## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N08000003757

FILED Mar 23, 2009 Secretary of State

Entity Name: HAMMERHEADS TRAVEL BASEBALL, INC.

Current Principal Place of Business: New Principal Place of Business:

122 KNOLL WAY JUPITER, FL 33477

Current Mailing Address: New Mailing Address:

122 KNOLL WAY 5500 MILITARY TRL #22-176 JUPITER, FL 33458

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

FARNAN, WILLIAM P
122 KNOLL WAY
5500 MILITARY TRL #22-176
JUPITER, FL 33477 US
JUPITER, FL 33458 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: 03/23/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P ( ) Delete Title: P (X) Change ( ) Addition Name: FARNAN, WILLIAM P P (X) Change ( ) Addition Name: FARNAN, WILLIAM P

 Address:
 122 KNOLL WAY
 Address:
 5500 MILITARY TRL #22-176

 City-St-Zip:
 JUPITER, FL 33477
 City-St-Zip:
 JUPITER, FL 33458

Title: VP ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 NIEVES, EMANUEL
 Name:

 Address:
 17369 121ST TER N
 Address:

 City-St-Zip:
 JUPITER, FL 33469
 City-St-Zip:

Title: S () Delete Title: S (X) Change () Addition

Name: FARNAN, KELLY Name: FARNAN, KELLY

 Address:
 122 KNOLL WAY
 Address:
 5500 MILITARY TRL #22-176

 City-St-Zip:
 JUPITER, FL 33477
 City-St-Zip:
 JUPITER, FL 33458

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 FARNAN P 03/23/2009