2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 31, 2009
Secretary of State

DOCUMENT# N08000007596

Entity Name: ST LUCIE BASEBALL TRAINING INC

Current Principal Place of Business:

2014 SE DOVERBROOK ST.
PORT ST LUCIE, FL 34983

New Principal Place of Business:

Current Mailing Address:

2014 SE DOVERBROOK ST.
PORT ST LUCIE, FL 34983

New Mailing Address:

FEI Number: 80-0236459 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SPENCER, BRIAN
455 NW RAYMOND LN
PORT ST LUCIE, FL 34983 US

Name and Address of New Registered Agent:

SPENCER, BRIAN
2014 SE DOVERBROOK ST
PORT ST LUCIE, FL 34983 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: _____ 03/31/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: SPENCER, BRIAN
Address: 455 NW RAYMOND LN
City-St-Zip: PORT SAINT LUCIE, FL 34983 US

Title: VP ( ) Delete
Name: BOLTERSDORF, JOHN
Address: 5283 NW ALMOND LN
City-St-Zip: PORT ST LUCIE, FL 34986 US

Title: S ( ) Delete
Name: SPENCER, SANDRA
Address: 455 NW RAYMOND LN
City-St-Zip: PORT ST LUCIE, FL 34983 US

Title: CCH ( ) Delete
Name: APUGLIESE, LOU
Address: 2850 SE PACE DR
City-St-Zip: PORT ST LUCIE, FL 34984 US

Title: T ( ) Delete
Name: BOLTERSDORF, LINDA
Address: 5283 NW ALMOND LN
City-St-Zip: PORT ST LUCIE, FL 34986 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: SPENCER, BRIAN
Address: 2014 SE DOVERBROOK ST
City-St-Zip: PORT SAINT LUCIE, FL 34983 US

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

Title: S (X) Change ( ) Addition
Name: SPENCER, SANDRA
Address: 2014 SE DOVERBROOK ST
City-St-Zip: PORT ST LUCIE, FL 34983 US

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

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: BRIAN K SPENCER PRES 03/31/2009
Electronic Signature of Signing Officer or Director — Date