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Mar 07 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N19416 (9)

1. Corporation Name

AUBURNDALÉ LITTLE LEAGUE BASEBALL, INC.

Principal Place of Business

HAMPTON STREET
P.O. BOX 981
AUBURNDALÉ FL 33823

Mailing Address

HAMPTON STREET
P.O. BOX 981
AUBURNDALÉ FL 33823-09813. Date Incorporated or Qualified
02/25/19873a. Date of Last Report
05/01/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

2a. Mailing Address

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

4. FEI Number

59-2323360

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☐ Yes☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ISON, ALICE
620 OAKLAND ST
AUBURNDALÉ FL 33823

81 Name

Michael Mahler

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

2019 Brentwood Drive

83

84 City

Auburndale

FL

85 Zip Code

33823

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, in both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Treasurer/Registered Agent

2-20-97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE
NAME SMITH, JOEY
STREET ADDRESS 4223 SHADOW WOOD CT
CITY-ST-ZIP WINTER HAVEN FLTITLE VD ☒ DELETE
NAME DUNAWAY, CAROL
STREET ADDRESS 1535 ROBIN STREET
CITY-ST-ZIP AUBURNDALÉ FLTITLE SD ☐ DELETE
NAME DEAN, DEBBIE
STREET ADDRESS 2004 KIRKLAND LAKE DRIVE
CITY-ST-ZIP AUBURNDALÉ FLTITLE TD ☒ DELETE
NAME ISON, ALICE
STREET ADDRESS 620 OAKLAND RD
CITY-ST-ZIP AUBURNDALÉ FLTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP☐ Change ☐ AdditionVice President/Director ☐ Change ☒ AdditionBill Coughlin
2016 Brentwood Drive
Auburndale, FL 33823☐ Change ☐ AdditionTreasurer/Director ☐ Change ☒ AdditionMichael Mahler
2019 Brentwood Drive
Auburndale, FL 33823☐ Change ☐ Addition☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Debbie Dean DEBBIE DEAN

2/20/97

941-688-7038

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0063258

CR2E037 (9/96)