03011999-90048-026-$70.00-$70.00

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NONPROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N21360

1. Corporation Name

PINELLAS PARK PONY BASEBALL, INC.

Principal Place of Business	Mailing Address
P.O. BOX 246 PINELLAS PARK FL 33665	P.O. BOX 246 PINELLAS PARK FL 33665

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 Country 25	Zip 29 33781 Country 30

3. Date Incorporated or Qualified: 06/29/1987

4. FEI Number: 59-2837775 — Applied For / Not Applicable

5. Certificate of Status Desired ☑ — $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

BETTY BAXTER
5461 65TH TERR N.
PINELLAS PARK FL 34665

10. Name and Address of New Registered Agent

81 Name: Frank Filmon
82 Street Address (P.O. Box Number is Not Acceptable): 6161 82nd Terrace North
83
84 City: Pinellas Park FL 85 Zip Code: 33781

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, or 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] FRANKLIN J FILMON PRES. — DATE: 1/20/99

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☑ DELETE	1.1 TITLE	President D	☑ Change ☐ Addition
NAME	LAWRENCE, DANIEL		1.2 NAME	Frank Filmon	
STREET ADDRESS	5941 72ND AVE NO.		1.3 STREET ADDRESS	6161 82nd Terrace, North	
CITY-ST-ZIP	PINELLAS PARK FL 33781		1.4 CITY-ST-ZIP	Pinellas Park, FL 33781	
TITLE	VD	☐ DELETE	2.1 TITLE	Vice-President D	☑ Change ☐ Addition
NAME	LARRY BAXTER		2.2 NAME	Bill McCormick	
STREET ADDRESS	5461 65TH TERR.		2.3 STREET ADDRESS	5956 107th Terrace, North	
CITY-ST-ZIP	PINELLAS PARK FL 34665		2.4 CITY-ST-ZIP	Pinellas Park, FL 33782	
TITLE	TD	☐ DELETE	3.1 TITLE	Treasurer D	☑ Change ☐ Addition
NAME	BAXTER, BETTY		3.2 NAME	Teri Voss	
STREET ADDRESS	5461 65TH TERR. NO		3.3 STREET ADDRESS	4181 67th Ave. North	
CITY-ST-ZIP	LARGO FL 34677		3.4 CITY-ST-ZIP	Pinellas Park, FL 33781	
TITLE	PAT	☐ DELETE	4.1 TITLE	Player Agent D	☑ Change ☐ Addition
NAME	THOMAS, PAT		4.2 NAME	Ruth Filmon	
STREET ADDRESS	5965 78 AVE. NO.		4.3 STREET ADDRESS	6161 82nd Terrace, North	
CITY-ST-ZIP	PINELLAS PARK FL 34665		4.4 CITY-ST-ZIP	Pinellas Park, FL 33781	
TITLE		☐ DELETE	5.1 TITLE	Secretary D	☐ Change ☑ Addition
NAME			5.2 NAME	Joe Schafer	
STREET ADDRESS			5.3 STREET ADDRESS	5760 82nd Terrace, N	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	Pinellas Park, FL 33781	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

14. I 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, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED [signature] FRANKLIN Filmon — 1/20/99 — 727-547-6312

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (11/98)