2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N22974

FILED Jan 25, 2005 Secretary of State

Entity Name: EAST LAKELAND BASEBALL, INC.

Current Principal Place of Business: New Principal Place of Business: 1140 FISH HATCHERY RD LAKELAND, FL 33801 **Current Mailing Address: New Mailing Address:** PO BOX 92716 LAKELAND, FL 33804 FEI Number: 59-2619313 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BARNETT, EDDIE 2427 ISLAND OAKS E LAKELAND, FL 33805 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BLACKMON, JOHN Name: Name: 3333 NORTH COMBEE RD Address: Address: City-St-Zip: LAKELAND, FL 33805 City-St-Zip: Title: () Delete Title: () Change () Addition Name: BARNETT, EDDIE Name: Address: 2427 ISLAND OAKS E Address: City-St-Zip: LAKELAND, FL 33805 City-St-Zip: Title: () Delete Title: (X) Change () Addition ROBERTS, GERMAINE Name: HENDRICKSON, ART Name: 325 ED PADGETT ROAD Address: Address: 1224 EL CAMINO RD City-St-Zip: LAKELAND, FL 33809 City-St-Zip: LAKELAND, FL 33805 Title: () Delete Title: (X) Change () Addition Name: BARNETT, KELLIE Name: MALONE, RHONDA 2427 ISLAND OAKS EAST 835 FISH HATCHERY RD Address: Address: City-St-Zip: LAKELAND, FL 33805 City-St-Zip: LAKELAND, FL 33801 Title: () Delete Title: () Change () Addition BARNETT, KELLIE Name: Name: 2427 ISLAND OAKS E Address: Address: City-St-Zip: LAKELAND, FL 33805 City-St-Zip: Title: () Delete Title: () Change () Addition SLOAN, STEVE Name: Name: Address: 130 HARDIN COMBEE RD Address: LAKELAND, FL 33801 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KELLIE L. BARNETT D 01/25/2005