

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25111

FILED
Jan 16, 2009
Secretary of State

Entity Name: LAKE WALES LITTLE LEAGUE, INC.

Current Principal Place of Business:

300 NORTH LAKESHORE BLVD
LAKE WALES, FL 33853 US

New Principal Place of Business:

Current Mailing Address:

C/O WILLIAM C. FARRER
PO BOX 1571
LAKE WALES, FL 338591571

New Mailing Address:

C/O JAMES MAGGARD
PO BOX 1571
LAKE WALES, FL 338591571

FEI Number: 59-2308869

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FARRER, WILLIAM C
4824 BENTON STREET
LAKE WALES, FL 33859 US

Name and Address of New Registered Agent:

MAGGARD, JAMES
811 CARLTON AVE
LAKE WALES, FL 33853 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: JAMES MAGGARD

01/16/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P/D () Delete
Name: FARRER, WILLIAM C
Address: 4824 BENTON STREET
City-St-Zip: LAKE WALES, FL 33859

Title: V/D () Delete
Name: KINNEY, TOMMY
Address: 1305 STOKES ROAD
City-St-Zip: LAKE WALES, FL 33898

Title: S/D () Delete
Name: MAGGARD, MICHELLE
Address: 811 CARLTON AVENUE
City-St-Zip: LAKE WALES, FL 33853

Title: T/D () Delete
Name: GILL, WILLIAM D
Address: 3815 COUNTRY OAKS LANE
City-St-Zip: LAKE WALES, FL 33898

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P/D (X) Change () Addition
Name: MAGGARD, JAMES
Address: 811 CARLTON AVE
City-St-Zip: LAKE WALES, FL 33853

Title: V/D (X) Change () Addition
Name: MAGGARD, MICHELLE
Address: 811 CARLTON AVE
City-St-Zip: LAKE WALES, FL 33893

Title: S/D (X) Change () Addition
Name: RICHARDS, KARI
Address: 427 E JOHNSON AVE
City-St-Zip: LAKE WALES, FL 33853

Title: T/D (X) Change () Addition
Name: LANOUE, WILLIAM
Address: 29 STATE ROAD 60 W
City-St-Zip: LAKE WALES, FL 33893

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 G LANOUE

T/D

01/16/2009

Electronic Signature of Signing Officer or Director

Date