2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29365

FILED Apr 16, 2009 Secretary of State

Entity Name: WEST BOCA YOUTH BASEBALL, INC.

Current Principal Place of Business: New Principal Place of Business:

6801 LAKE WORTH ROAD 2700 N. MILITARY TRAIL SUITE 214 SUITE 230

LAKE WORTH, FL 33467 BOCA RATON, FL 33431

Current Mailing Address: New Mailing Address:

PO BOX 970893

BOCA RATON, FL 33497 08

FEI Number: 65-0094087 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:

MCMAHON, BRIAN DEVINO, GEORGE 2700 N. MILITARY TRAIL 6801 LAKE WORTH RD

SUITE 214 SUITE 230

LAKE WORTH, FL 33467 US BOCA RATON, FL 33431 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: GEORGE C. DEVINO 04/16/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete

DEVINO, GEORGE DEVINO, GEORGE Name: Name: PO BOX 970893 Address: PO BOX 970893 Address:

City-St-Zip: BOCA RATON, FL 334970893 City-St-Zip: BOCA RATON, FL 334970893

Title: PD () Delete Title: SD (X) Change () Addition MCMAHON, BRIAN Name: ZEHRING, JEFF Name:

Address: 21458 SUMMERTRACE CIR Address: PO BOX 970893 City-St-Zip: BOCA RATON, FL 33428 City-St-Zip: BOCA RATON, FL 33497 08

Title: VD. () Delete Title: (X) Change () Addition

FORBES, DAVID SANDERS, JOHN Name: Name: Address: PO BOX 970893 Address: PO BOX 970893

City-St-Zip: BOCA RATON, FL 334970893 City-St-Zip: BOCA RATON, FL 334970893

Title: SD () Delete Title: VD (X) Change () Addition

Name: STRICKLAND, DAVID Name: STRICKLAND, DAVID Address: 22837 PONDEROSA DR Address: 22837 PONDEROSA DR City-St-Zip: BOCA RATON, FL 33428 City-St-Zip: BOCA RATON, FL 33428

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: GEORGE C. DEVINO PD 04/16/2009