

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90079 007 ****61.25

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DOCUMENT # N30947

1. Corporation Name

GREATER CORAL SPRINGS MEN'S SENIOR BASEBALL LEAG
UE, INC.

Principal Place of Business

2855 UNIVERSITY DRIVE #110
CORAL SPRINGS FL 33065
US

Mailing Address

2855 UNIVERSITY DR.
110
CORAL SPRINGS FL 33065
US

181270-90079-7



2. Principal Place of Business

21 2825 UNIVERSITY DR.

Suite, Apt. #, etc.

22 350

City & State

23 CORAL SPRINGS FLORIDA

Zip Country

24 33065

25

2a. Mailing Address

26 2825 UNIVERSITY DR.

Suite, Apt. #, etc.

27 350

City & State

28 CORAL SPRINGS FLORIDA

Zip Country

29 33065

30

3. Date Incorporated or Qualified

03/01/1989

4. FEI Number

65-0101305

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

LUZIM, RONALD A.

2855 UNIVERSITY DRIVE #110-2825 UNIVERSITY DR. #350
CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

TITLE DP
NAME LUZIM, RONALD A.
STREET ADDRESS 2855 UNIVERSITY DR., #110 2825 UNIVERSITY DR. #350
CITY-ST-ZIP CORAL SPRINGS FL

TITLE D

NAME LIPMAN, LLOYD
STREET ADDRESS 11362 NW 10TH PLACE
CITY-ST-ZIP CORAL SPRINGS FL

TITLE D

NAME BARRY GIBELL
STREET ADDRESS 8415 FOREST HILLS DRIVE
CITY-ST-ZIP CORAL SPRINGS FL

TITLE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)