UNIFORM BUSINESS REPORT (UBR)

FILED 2003 NOT-FOR-PROFIT CORPORATION May 05, 2003 8:00 am Secretary of State **DOCUMENT # N31260** 05-05-2003 91781 022 ****61.25 1. Entity Name MANATEE G.T. BRAY EAST LITTLE LEAGUE, INC. Principal Place of Business Mailing Address 11041429 1024 24TH ST E P O BOX 1662 **BRADENTON FL 34208 BRADENTON FL 34206** 2. Principal Place of Business 3. Mailing Address 5500 (alrewood Ranch A 90 Box 1667 Suite, Apt. #, etc T CHECK HERE IF MAKING CHANGES Applied For City & State 4. FEI Number 65-0103207 City & State radentm ntendes Not Applicable Country \$8.75 Additional 5. Certificate of Status Desired ムンル Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NORMA LLOYD Street Address 1607 34TH AVE E **BRADENTON FL 34208** 8. 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. I am familiar with, and accept the obligations of r SIGNATURE Signature, typed or printed name of ed agent and title if applicable 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE Delete TITLE Saundre HABBOR, JENNIFER NAME NAME 1515 34TH. AVE E. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **BRADENTON FL** 34812 enton Fl **VD** TITLE Delete ☐ Change Stan Sharele 3610 6745+C+E PARCELS, RICK NAME NAME 3605 62ND ST E STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Bradentm, FL 34208 BRADENTON FL 34208 TITLE PD **X** Delete TITLE ☐ Change X Addition Mike Petrilla NAME LLOYD, NORMA NAME 4806, 11th Ave cirE. STREET ADDRESS STREET ADDRESS 1607 34TH AVE E **BRADENTON FL 34202** CITY-ST-ZIP CITY-ST-ZIP Bradenton, FL 34208 ☐ Addition TITLE ☐ Delete ☐ Change CATHY, SHARGH Sharek NAME NAME STREET ADDRESS 3610 67TH ST CT E STREET ADDRESS CITY-ST-7IP **BRADENTON FL 34208** CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP

NAME

SIGNATURE:

NAME

STREET ADDRESS