

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N36005

1. Entity Name
FRED WATERS BASEBALL CLINIC, INC.



Principal Place of Business

101 S JEFFERSON ST
D
PENSACOLA, FL 32501 US

Mailing Address

101 S JEFFERSON ST
D
PENSACOLA, FL 32501 US

FILED
Jun 16, 2008 08:00 AM
Secretary of State



05122008 No Chg-NP

CR2E037 (4/06)

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4. FEI Number
59-2985178

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

HOOK, MICHAEL
4060 MONTALVO
PENSACOLA, FL 32504

**DO NOT WRITE
IN THIS SPACE**

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 registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

Filing Fee is \$61.25
Due by September 12, 2008

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME HOOK, MICHAEL
STREET ADDRESS 4060 MONTALVO
CITY-ST-ZIP PENSACOLA, FL 32504

TITLE D
NAME PARKER, KENNETH
STREET ADDRESS 2528 ROSEDOWN
CITY-ST-ZIP CANTONMENT, FL 32533

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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06/16/08-80002-019 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/12/08
Date

850-433-0809
Daytime Phone #

Michael Hook