

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 12, 2008 8:00 am
Secretary of State

03-12-2008 90027 007 ****61.25

DOCUMENT # N40861	
1. Entity Name NORTH PORT AREA LITTLE LEAGUE INC.	



Principal Place of Business PRICE BLVD. NORTH PORT FL 34287	Mailing Address P.O. BOX 7143 NORTH PORT FL 34287
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2. Principal Place of Business - No P.O. Box # 6205 W. Price Blvd	3. Mailing Address P.O. Box 7143
Suite, Apt. #, etc.	Suite, Apt. #, etc.

1st MOORE CR2E037 (10/07)

City & State North Port FL	City & State North Port, FL
Zip 34287	Zip 34290
Country	Country

4. FEI Number 27-0007536	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent MELLOR, CORD C. 13801-D TAMiami TRAIL NORTH PORT FL 34287	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL Zip Code	

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	
FL Zip Code	

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 _____ (NOTE: Registered Agent signature and used when reinstating) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD ROWE, ANDREW S 1800 SCARLETT AVE NORTH PORT FL 34289 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Andrew Rowe 1800 scarlett ave North Port, FL 34289 ☒ Change ☐ Addition (Treasurer)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD NICHOLS, DANIEL B 5171 KENVIL DR NORTH PORT FL 34288 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Michael J. Steele 2336 Brewster Rd North Port, FL 34288 ☐ Change ☒ Addition (Vice President)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BURKE, TERRY 4203 OZARK AVE NORTH PORT FL 34287 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Christopher Trembley 2435 Alesio Ave North Port, FL 34286 ☐ Change ☒ Addition (Secretary)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SABORSE, STEVEN 6663 LAPIDUS RD NORTH PORT FL 34287 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Steven Saborse 3474 Parade Terrace North Port, FL 34286 ☒ Change ☐ Addition (President)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: _____ 3/2/08