

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N40861

FILED
Oct 14, 2009
Secretary of State

Entity Name: NORTH PORT AREA LITTLE LEAGUE INC.

Current Principal Place of Business:

6205 W. PRICE BLVD
NORTH PORT, FL 34287

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7143
NORTH PORT, FL 34290

New Mailing Address:

FEI Number: 27-0007536 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MELLOR, CORD C.
13801-D TAMIAMI TRAIL
NORTH PORT, FL 34287 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: STEVE SABORSE

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: ROWE, ANDREW
Address: 1800 SCARLETT AVE
City-St-Zip: NORTH PORT, FL 34289

Title: VP () Delete
Name: STEELE, MICHAEL J
Address: 2336 BREWSTER RD
City-St-Zip: NORTH PORT, FL 34288

Title: S () Delete
Name: TREMBLEY, CHRISTOPHER
Address: 2435 ALESIO AVE
City-St-Zip: NORTH PORT, FL 34286

Title: P () Delete
Name: SABARSE, STEVEN
Address: 3474 PARADE TERRACE
City-St-Zip: NORTH PORT, FL 34286

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: VORK, REBECCA
Address: 2612 COTTAGE LANE
City-St-Zip: NORTH PORT, FL 34286

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: STEVE SABORSE

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10/14/2009

Electronic Signature of Signing Officer or Director

Date