

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N41761

FILED
Apr 25, 2007
Secretary of State

Entity Name: NEW TAMPA LITTLE LEAGUE, INC.

Current Principal Place of Business:

18050 KINNAN ST.
TAMPA, FL 33647 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 46847
TAMPA, FL 33647 US

New Mailing Address:

FEI Number: 59-3015624

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VILLANO, FRANK
PO BOX 46847
TAMPA, FL 33647 US

Name and Address of New Registered Agent:

HARRELL, LINDA
10539 CANARY ISLE DRIVE
TAMPA, FL 33647 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: LINDA HARRELL

04/25/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WOODEN, MONICA
Address: 9108 WOODRIDGE RUN DR.
City-St-Zip: TAMPA, FL 33647

Title: VPD () Delete
Name: SMITH, DOUG
Address: 8325 GOLDEN PRAIRIE DRIVE
City-St-Zip: TAMPA, FL 33647

Title: SD () Delete
Name: WICKERSHAM, MIKE
Address: 17703 GREY EAGLE ROAD
City-St-Zip: TAMPA, FL 33647

Title: TD (X) Delete
Name: VILLANO, FRANK
Address: 9311 WELLINGTON PARK CIR
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: TD (X) Change () Addition
Name: HARRELL, LINDA
Address: 10539 CANARY ISLE DRIVE
City-St-Zip: TAMPA, FL 33647

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: LINDA HARRELL

TD

04/25/2007

Electronic Signature of Signing Officer or Director

Date