

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Nov 16, 2010
Secretary of State

DOCUMENT# N45267

Entity Name: PORT ST. LUCIE NATIONAL LITTLE LEAGUE, INC.**Current Principal Place of Business:**201 NW PRIMA VISTA BLVD
PORT ST LUCIE, FL 34985**New Principal Place of Business:****Current Mailing Address:**PO BOX 8485
PORT ST. LUCIE, FL 34985**New Mailing Address:****FEI Number:** 65-0285230**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**MESSER, ROGER N
1555 ST. LUCIE WEST BLVD., N.W.
SUITE 202
PORT ST. LUCIE, FL 34986 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P/D
Name: GUSTIN, AMY
Address: PO BOX 8485
City-St-Zip: PORT ST. LUCIE, FL 34985 US

Title: V/P
Name: HOLLIETT, GARY
Address: 5145 WATER LILLY WAY
City-St-Zip: FORT PIERCE, FL 34981 US

Title: VP
Name: ROSADO, RICO
Address: 5813 NW ARGO CT
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: T/D
Name: RHODES, COLETTE
Address: PO BOX 13168
City-St-Zip: FT. PIERCE, FL 34979 US

I hereby 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 all other like empowered.

SIGNATURE: COLETTE RHODES

T/D

11/16/2010

Electronic Signature of Signing Officer or Director

Date