

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45267

FILED
Feb 21, 2012
Secretary of State

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:

RHODES, COLETTE
1001 HARBOR STREET
FORT PIERCE, FL 34950 US

Name and Address of New Registered Agent:

EDGE, JOE
932 SW BAYSHORE BLVD
PORT ST. LUCIE, FL 34983 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: AMY GUSTIN

02/21/2012

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: THEIAULT, MISTY
Address: PO BOX 8485
City-St-Zip: PORT ST. LUCIE, FL 34985 US

Title: VP-S
Name: LIBERTELLI, PAT
Address: PO BOX 8485
City-St-Zip: PORT ST. LUCIE, FL 34985

Title: PG
Name: THERIAULT, ERIC
Address: PO BOX 8485
City-St-Zip: PORT ST. LUCIE, FL 34985 US

Title: TR
Name: GRIFFITH, DAWN
Address: PO BOX 8485
City-St-Zip: PORT ST. LUCIE, FL 34985

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: AMY GUSTIN

PD

02/21/2012

Electronic Signature of Signing Officer or Director

Date