

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45795

FILED  
Mar 10, 2008  
Secretary of State

Entity Name: PORT SALERNO LITTLE LEAGUE, INC.

## Current Principal Place of Business:

CORNER OF GROUPER AVE  
PORT SALERNO, FL 34992

## New Principal Place of Business:

## Current Mailing Address:

P.O. BOX 192  
PORT SALERNO, FL 34992

## New Mailing Address:

FEI Number: 59-3097112

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

PLATT, JUANITA  
50 SW BLACKBURN TERRACE  
#10  
STUART, FL 34997 US

## Name and Address of New Registered Agent:

BOROSKY, RICK  
3401 SE CASCADIA WAY  
HOBE SOUND, FL 33455 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: RICK BOROSKY

03/10/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: PD ( ) Delete  
Name: NOLAN, KEVIN  
Address: 4776 SE MANATEE TERRACE  
City-St-Zip: STUART, FL 34997

Title: VD ( ) Delete  
Name: ALTHAUSER, MIKE  
Address: 2122 SW PERRY TERRACE  
City-St-Zip: STUART, FL 34997

Title: TD ( ) Delete  
Name: PLATT, JUANITA  
Address: 50 SW BLACKBURN TERRACE #10  
City-St-Zip: STUART, FL 34997

Title: SD (X) Delete  
Name: GAGNON, CHRIS  
Address: 1923 SW LOCKS ROAD  
City-St-Zip: STUART, FL 34997

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition  
Name: FLANAGAN, JUDY  
Address: PO BOX 192  
City-St-Zip: PORT SALERNO, FL 34992

Title: VD (X) Change ( ) Addition  
Name: HAERTJENS, JEFF  
Address: PO BOX 192  
City-St-Zip: PORT SALERNO, FL 34992

Title: TD (X) Change ( ) Addition  
Name: BOROSKY, RICK  
Address: PO BOX 1583  
City-St-Zip: HOBE SOUND, FL 33475

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: RICK BOROSKY

TD

03/10/2008

Electronic Signature of Signing Officer or Director

Date