

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

96 AUG 28 AM 10:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

300001341103
-09/08/96 -01051 -002
*****70.00 *****70.00

DOCUMENT # N46030
1. Corporation Name

MEN'S BASEBALL ASSOCIATION OF
PALM BEACH COUNTY, INC.

Principal Place of Business

Mailing Address

3. Date Incorporated or Qualified November 13, 1991	3a. Date of Last Report May 1, 1995
4. FEI Number 65-0299456	Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. 1801 Stonehaven Drive Suite, Apt. #, etc.	26. 1801 Stonehaven Drive Suite, Apt. #, etc.
22. City & State	27. City & State
23. Boynton Beach, FL Zip 33462 Country	28. Boynton Beach, FL Zip 33462 Country
24. Palm Beach	29. 33462
30. Palm Beach	

9. Name and Address of Current Registered Agent

Robert E. Bourne, Jr. Esquire
521 Lake Avenue, Suite 3
Lake Worth, Florida 33460

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is not acceptable)
83.
84. City
85. Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	President	1.1 TITLE P/D	President /Director
NAME	Davis, Jay	1.2 NAME	Aldred, David
STREET ADDRESS	2850 S.W. 4th Street	1.3 STREET ADDRESS	1417 14th Court
CITY-ST-ZIP	Boynton Beach, Florida	1.4 CITY-ST-ZIP	Jupiter, FL 33463
TITLE VP	Vice President	2.1 TITLE	
NAME	Frezza, Buddy	2.2 NAME	
STREET ADDRESS	6115 Wood Creek Court	2.3 STREET ADDRESS	
CITY-ST-ZIP	Jupiter, FL 33458	2.4 CITY-ST-ZIP	
TITLE VP	Vice President	3.1 TITLE VP/D	Vice President/Director
NAME	Morales, Carlos	3.2 NAME	Alonso, Bobby
STREET ADDRESS	121 Grenada Street	3.3 STREET ADDRESS	1542 Maypop Road
CITY-ST-ZIP	West Palm Beach, Florida	3.4 CITY-ST-ZIP	West Palm Beach, FL 33415
TITLE ST	Secretary-Treasurer	4.1 TITLE T	Treasurer /Director
NAME	Randall, Jim	4.2 NAME	Randall, Jim
STREET ADDRESS	510 Whitney Ave	4.3 STREET ADDRESS	6595 Massachusetts DR.
CITY-ST-ZIP	Lantana, FL 33462	4.4 CITY-ST-ZIP	Lantana, FL 33462
TITLE D	Director	5.1 TITLE S	Secretary /Director
NAME	Vollgrebe, Ron	5.2 NAME	Edmiston, Bob
STREET ADDRESS	940 Clint Moore Rd	5.3 STREET ADDRESS	1801 Stonehaven Dr.
CITY-ST-ZIP	Boca Raton, FL	5.4 CITY-ST-ZIP	Boynton Beach, FL 33436
TITLE D	Director	6.1 TITLE VP/D	Vice President/Director
NAME	Bourne, Robert E., Jr.	6.2 NAME	Eaton, Craig
STREET ADDRESS	521 Lake Avenue, Suite 3	6.3 STREET ADDRESS	3307 Balusrol Ln.
CITY-ST-ZIP	Lake Worth, FL 33460	6.4 CITY-ST-ZIP	Lake Worth, FL 33467

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k) Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: ✓ Bob Edmiston, Secretary

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

August 26, 1996 (561) 585-9090

CR2E037 (3/96)