NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED May 13, 2002 8:00 am Secretary of State

DOCUMENT # N 46030		05-13-2002 90072 039 ****61.25				
Men's Baseball Association of Palm Beach Country						
Inc.						
DO NOT WRITE IN						
2. Principal Place of Business / / / 0 3. M	ncipal Place of Business / // A 3. Mailing Address / // (C)					
Suite, Apt. #, etc.	75 Massachusetts Dr. Suite, Apt. 1, etc.		· <u>-</u> -	DO NOT WRITE IN THIS SPACE		
	city & State			4. FEI Number Applied For Not Applied For		
Zip Country	Zip 3462	Sountry D	/ 5. Certificate of St	atus Desired 🖂 💲	8.75 Additional	
3)762 raim Deach 3	3T62	Palm Beac	4	First of Current Registered	ee Required	
Name Rand (
				20. Box Number is Not Aggeptable)		
			MASSUEAUS			
		City	E/	FL	Zip Code	
8. The above named entity submits this statement for the pu	rpose of changing its	s registered office or reg		<u> </u>	33962	
SIGNATURE James Kanda (4/30/02						
Slandaure. lyped or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when remistating) DATE DATE						
FEE IS \$61.25	9. Election Car	mpaign Financing	\$5.00 May Be	Make Check	Payable to	
Initial or Amended UBR Trust Fund Contribution.			Added to Fees	Department	•	
10. OFFICERS AND DIRECTOR	RS					
TITLE President		TITLE NAME			701)	
	ET ADDRESS 6595 Massach usetts all.				B (1)	
CITY-ST-ZIP Luntana, Fr. 33462		CITY-ST-ZIP	· · ·		CR2E037B (12/01)	
ME Patrick Moroney		TITLE NAME			ORZE	
ET ADDRESS 2675, Cambridge Rd.		STREET ADDRESS				
TY-ST-ZP Lantana, FL 33462		CITY-ST-ZIP TITLE				
NAME Lee Holmes	Lee Holmes					
	ESS 217 Fleming Ave.		DO	NOT WRIT	E	
TITLE VP	VP					
NAME Richard Gragg			IN I	THIS SPAC		
TILE Willy Thompson VI	Willer Thompson V.P.					
THEET ADDRESS 1490 S. Military Trail #9		name Street address				
SI-IP West Palm Beach, FL 33415		CITY-ST-ZIP	a.	·		
NAME Roberto Alonso, Sr.		TITLE				
STREET ADDRESS 1842 Maypop Rd.		NAME STREET ADDRESS				
CITY-ST-ZIP West Palm Beach, FL	33415	CITY-ST-ZIP				
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or on an						
attachment with an address, with all other like empowered.						