

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N46818

Entity Name: WELLSWOOD PONY BASEBALL, INC.

FILED  
May 07, 2004  
Secretary of State

## Current Principal Place of Business:

4901 NORTH HOWARD AVENUE  
TAMPA, FL 33614

## New Principal Place of Business:

4901 NORTH HOWARD AVENUE  
TAMPA, FL 33603

## Current Mailing Address:

TONY SALADINO JR.  
2906 W. OSBORNE AVE.  
TAMPA, FL 33614

## New Mailing Address:

FEI Number: 59-3102915      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

SCAGLIONE, PETER JR  
2127 W ML KING JR BLVD  
TAMPA, FL 33607 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: D ( ) Delete  
Name: SALADINO, TONY JR.  
Address: 2906 W. OSBORNE AVE.  
City-St-Zip: TAMPA, FL 33614

Title: VPD ( ) Delete  
Name: PEREZ, JACK M  
Address: 15112 CONTOY PLACE  
City-St-Zip: TAMPA, FL 33618

Title: SD ( ) Delete  
Name: DELOBO, CELIA  
Address: 10314 CARROL COVE PLACE  
City-St-Zip: TAMPA, FL 33612

Title: TD ( ) Delete  
Name: SALADINO, HELEN  
Address: 2906 W. OSBORNE AVE  
City-St-Zip: TAMPA, FL 33614

Title: PD ( ) Delete  
Name: PRADO, JUAN C  
Address: 6625 VAN DYKE ROAD  
City-St-Zip: LUTZ, FL 33558

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PD (X) Change ( ) Addition  
Name: LEAL, EDWIN  
Address: 4157 ROLLING SPRINGS DRIVE  
City-St-Zip: TAMPA, FL 33624

Title: SD (X) Change ( ) Addition  
Name: DELOBO, CELIA  
Address: 10310 CARROLL SHORES PLACE  
City-St-Zip: TAMPA, FL 33612

Title: TD (X) Change ( ) Addition  
Name: SALADINO, HELEN  
Address: 2906 W. OSBORNE AVE  
City-St-Zip: TAMPA, FL 33614

Title: VPD (X) Change ( ) Addition  
Name: PRADO, JUAN C  
Address: 6625 VAN DYKE ROAD  
City-St-Zip: LUTZ, FL 33558

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JUAN C. PRADO

VP

05/07/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date