## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## DOCUMENT # N46818 **Secretary of State** 1. Entity Name 03-15-2006 90101 047 \*\*\*\*61.25 WELLSWOOD PONY BASEBALL, INC. Principal Place of Business Mailing Address 4901 NORTH HOWARD AVENUE TAMPA PL 33603 TONY SALADINO JR. <del>2006</del> W. OSBORNE AVE. TAMPA FL 33614 2. Principal Place of Business 4901 N. HOWARD AV 3. Mailing Address 2907 Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State Applied For 4. FEI Number 59-3102915 Not Applicable Country Borough Zip 33 6. Name and Address of Current Registered Agent \$8.75 Additional 50 Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent SCAGLIONE, PETER JR Street Address (P.O. Box Number is Not Acceptable) 2127 W ML KING JR BLVD **TAMPA FL 33607** City Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typod or ponted frame of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PRESIDENT ☐ Delete TITLE TITLE ☐ Change **Addition** RONALD DARRIGO SALADINO, TONY JR. HAME NAME STREET ADDRESS 2005-W. OSBORNE AVE. 2907 2121 W. COACHMAN STREET ADDRESS **TAMPA FL 33614** CITY-ST-ZIP CITY-ST-ZIP TAMPA, FL 33609 PD TIFLE TITLE Vice-PRes ☐ Change Delete Addition RICK CALDEVILLA LEAL, EDWIN NAME NAME 10411 CARROL COVE PLACE 4157 ROLLING SPRINGS DRIVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TAMPA FL 33624 CiTY-ST-ZIP TAMPA FL. 33612 SD TITLE Delete TITLE ☐ Change ■ Addition DOCOBO D**BE**OBO, CELIA NAME NAME STREET ADDRESS 10310 CARROLL SHORES PLACE STREET ADDRESS TAMPA FL 33612 CITY-ST-ZIP CITY-ST-ZIF TD ☐ Delete ☐ Change ☐ Addition NAME SALADINO, HELEN NAME STREET ADDRESS 2906-W. OSBORNE AVE STREET ADDRESS *2907* CITY-ST-ZIP TAMPA FL 33614 CITY-ST-ZIP VPD TITLE X Delete TITLE ☐ Change Addition PRADO, JUAN C NAME NAME 6625 VAN DYKE ROAD STREET ADDRESS STREET ADDRESS **LUTZ FL 33558** CITY-ST-ZIP CITY-ST-ZIP Delete TITLE TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP

FILED

Mar 15, 2006 8:00 am

SIGNATURE: Helan Saladino HCLEN SALADINO 3/406 813-877-1191

if changed, or on an attachment with an address, with all other like empowered.

CITY-ST-ZIP

12. I hereby certify that the information supplied with this fiting does not qualify for the exemptions contained in Section 119, 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 Block 11