

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47871

FILED
Feb 20, 2007
Secretary of State

Entity Name: DELAND LITTLE LEAGUE, INC.

Current Principal Place of Business:

260 E. WALTZ AVE
DELAND, FL 32724

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 773
DELAND, FL 32720

New Mailing Address:

FEI Number: 59-3108376

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CARTER, JAMES W
2 TYMBER COVE
DELAND, FL 32724 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: PD () Delete
Name: CARTER, JAMES W
Address: 2 TYMBER COVE
City-St-Zip: DELAND, FL 32724

Title: VD () Delete
Name: GRAVES, MIKE
Address: 960 E. UNIVERSITY AVE
City-St-Zip: DELAND, FL 32724

Title: SD () Delete
Name: MARKUS, ROBIN
Address: 717 SHANE DRIVE
City-St-Zip: DELAND, FL 32724

Title: TD () Delete
Name: SADLON, ANDREW R
Address: 4380 GRANT ST
City-St-Zip: DELAND, FL 32724

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: ANDREW R. SADLON

TD

02/20/2007

Electronic Signature of Signing Officer or Director

Date