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Feb 06 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N48675 (5)

1. Corporation Name

MANATEE BABE RUTH LEAGUE, INCORPORATED

Principal Place of Business

% WILLIAM MORROW
5416 1ST AVENUE WEST
BRADENTON FL 34209

Mailing Address

PO BOX 14073
5416 1ST AVENUE WEST
BRADENTON FL 34280
US



2. Principal Place of Business	2a. Mailing Address
21 William J. High	26 P.O. Box 14073
22 Suite, Apt. #, etc. 124 30TH ST. N.W.	27 Suite, Apt. #, etc. 124 30TH ST. N.W.
23 City & State BRADENTON, FL.	28 City & State BRADENTON, FL
24 Zip 34205	29 Country USA
25	30

3. Date Incorporated or Qualified

05/01/1992

4. FEI Number

65-0247495

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes

☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

9. Name and Address of Current Registered Agent

MORROW, WILLIAM
5416 1ST AVENUE WEST
BRADENTON FL 34209

10. Name and Address of New Registered Agent

81 Name William J. High
82 Street Address (P.O. Box Number is Not Acceptable)
124 30TH ST. N.W.
83
84 City BRADENTON FL 85 Zip Code 34205

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 William J. High, President, William J. High 1/26/98
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FASS, RICK	1.2 NAME	
STREET ADDRESS	7109 16TH AVE NW	1.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	1.4 CITY-ST-ZIP	
TITLE	PD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	PO <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WILES, RAY	2.2 NAME	William J. High
STREET ADDRESS	8309-9TH AVE TERR NW	2.3 STREET ADDRESS	124 30TH ST. N.W.
CITY-ST-ZIP	BRADENTON FL	2.4 CITY-ST-ZIP	BRADENTON, FL 34205
TITLE	SD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	S.D. <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WAILAND, TOM	3.2 NAME	MARTHA RUPP
STREET ADDRESS	1908 49TH ST W	3.3 STREET ADDRESS	6411 LAFAYETTE Rd.
CITY-ST-ZIP	BRADENTON FL	3.4 CITY-ST-ZIP	BRADENTON, FL 34207
TITLE	TD <input checked="" type="checkbox"/> DELETE	4.1 TITLE	TD <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHLATMANN, SKIP	4.2 NAME	CINDY Kerns
STREET ADDRESS	460-46TH ST W	4.3 STREET ADDRESS	6612 32nd Ave W.
CITY-ST-ZIP	BRADENTON FL	4.4 CITY-ST-ZIP	BRADENTON FL 34209
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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:

William J. High 1/26/98 (941) 751-7605

CR2E037 (10/97)