

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N49188

FILED
Apr 28, 2006
Secretary of State

Entity Name: LAKE CITY/COLUMBIA COUNTY YOUTH BASEBALL, INC.

Current Principal Place of Business:

P.O. BOX 1845
LAKE CITY, FL 32056

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1845
LAKE CITY, FL 32056

New Mailing Address:

FEI Number: 59-3121410

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MUENCHEN, JOHN R.
4158 W. US HWY, 90
LAKE CITY, FL 32005 US

Name and Address of New Registered Agent:

MUENCHEN, JOHN R
4158 WEST US HIGHWAY 90
LAKE CITY, FL 32005 US

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: JOHN R MUENCHEN

04/28/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: CAMMY, SCOTT
Address: PO BOX 1845 BALLPARK GLEN
City-St-Zip: LAKE CITY, FL 32056

Title: D () Delete
Name: MURPHY, TIM
Address: P.O. BOX 1845 S.W. BALLPARK GLEN
City-St-Zip: LAKE CITY, FL 32056

Title: T () Delete
Name: MUENCHEN, JOHN
Address: 4158 W. US HWY, 90
City-St-Zip: LAKE CITY, FL 32055

Title: PD () Delete
Name: DAVIS, DAVID
Address: P.O. BOX 1845
City-St-Zip: LAKE CITY, FL 32056

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: FAULKNER, AUDIE
Address: PO BOX 1845 SW BALLPARK GLEN
City-St-Zip: LAKE CITY, FL 32056

Title: PD (X) Change () Addition
Name: NICHOLSON, MICHAEL
Address: P.O. BOX 1845 SW BALLPARK GLEN
City-St-Zip: LAKE CITY, FL 32056

Title: TD (X) Change () Addition
Name: MUENCHEN, JOHN R
Address: 4158 WEST US HIGHWAY 90
City-St-Zip: LAKE CITY, FL 32055

Title: D (X) Change () Addition
Name: DAVIS, DAVID
Address: P.O. BOX 1845 SW BALLPARK GLEN
City-St-Zip: LAKE CITY, FL 32056

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: JOHN R MUENCHEN

TD

04/28/2006

Electronic Signature of Signing Officer or Director

Date