2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000633

Entity Name: LAKE MARY LITTLE LEAGUE, INC.

FILED Jaņ 15, 2<u>00</u>7 Secretary of State

Current Principal Place of Business: New P	rincipal Place of Business:
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546 FREEMAN STREET 1409 HEARTHSTONE LANE LONGWOOD, FL 32750 LONGWOOD, FL 32750

Current Mailing Address: New Mailing Address:

P.O. BOX 951824 LAKE MARY, FL 327951824

FEI Number: 59-3157058 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

POTTER, DIANE M ZIEGLER, JOHN R P 546 FREEMAN STREET 1409 HEARTHSTONE LANE US LONGWOOD, FL 32750 LONGWOOD, FL 32750

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 ZIEGLER 01/15/2007

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete POTTER, DIANE M POTTER, DIANE M Name: Name: 546 FREEMAN STREET Address: 546 FREEMAN STREET Address: City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: LONGWOOD, FL 32750

Title: () Delete Title: (X) Change () Addition DONIHOO, ERIC DONIHOO, ERIC Name: Name:

Address: 1091 BLOOMBURY RUN Address: 1091 BLOOMBURY RUN City-St-Zip: HEATHROW, FL 32746 City-St-Zip: HEATHROW, FL 32746

Title: () Delete Title: PD (X) Change () Addition

ZIEGLER, JOHN ZIEGLER, JOHN P Name: Name: 1409 HEARTHSTONE LN 1409 HEARTHSTONE LN Address: Address: City-St-Zip: LONGWOOD, FL 32750 City-St-Zip: LONGWOOD, FL 32750

Title: TD () Delete Title: TD (X) Change () Addition Name: PULLIS, DALE Name: ZULCOSKI, ROBERT

512 WOODSTEAD CT. Address: Address: 253 MEADOW BEAUTY TERRACE LONGWOOD, FL 32779

City-St-Zip: City-St-Zip: SANFORD, FL 32771

Title: () Delete Title: () Change () Addition

COLE, BLAIR Name: Name: 366 MOHAVE TERRACE Address: Address: City-St-Zip: LAKE MARY, FL 32746 City-St-Zip:

Title: () Delete Title: () Change () Addition

WILLIAMS, SCOTT Name: Name: Address: 150 TANGERINE COURT Address: SANFORD, FL 32771 City-St-Zip: 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: JOHN ZIEGLER Ρ 01/15/2007