

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000633

FILED  
Aug 11, 2009  
Secretary of State

Entity Name: LAKE MARY LITTLE LEAGUE, INC.

**Current Principal Place of Business:**

253 MEADOW BEAUTY TER  
SANFORD, FL 32771

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 951824  
LAKE MARY, FL 327951824

**New Mailing Address:**

FEI Number: 59-3157058      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

ZULCOSKY, ROBERT  
253 MEADOW BEAUTY TER  
SANFORD, FL 32771      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: VD      ( ) Delete  
Name: HARDAN, WESLEY  
Address: 430 S. COUNTRY CLUB DR.  
City-St-Zip: LAKE MARY, FL 32746

Title: SD      ( ) Delete  
Name: MASTEN, JULIE  
Address: 888 SILVERWOOD DRIVE  
City-St-Zip: LAKE MARY, FL 32746

Title: PD      ( ) Delete  
Name: ZULCOSKI, ROBERT  
Address: 253 MEADOW BEAUTY TERRACE  
City-St-Zip: SANFORD, FL 32771

Title: TD      ( ) Delete  
Name: D'AQUISTO, JEN  
Address: 3601 WIMBLEDON DR.  
City-St-Zip: LAKE MARY, FL 32746

**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 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: JENNIFER D'AQUISTO

TD

08/11/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date