2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2008
Secretary of State

DOCUMENT# N93000001844

Entity Name: SEMINOLE NORTH LITTLE LEAGUE, INC.

Current Principal Place of Business:

135 N. SUMMERLIN AVE
SANFORD, FL 32771 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 1235
SANFORD, FL 32772 US

New Mailing Address:

FEI Number: 59-3438666 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

PIHAKIS,II, GEORGE
135 N SUMMERLIN AVE
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:	PD	( ) Delete
Name:	PIHAKIS,II, GEORGE	
Address:	135 N. SUMMERLIN AVE	
City-St-Zip:	SANFORD, FL 32771	
Title:	VD	( ) Delete
Name:	FORD, VERNON L	
Address:	1121 MERRITT ST	
City-St-Zip:	ALTAMONTE SPRINGS, FL 32701	
Title:	TD	( ) Delete
Name:	KOVACH, ED	
Address:	1 STONE GATE NORTH	
City-St-Zip:	LONGWOOD, FL 32779	
Title:	SD	( ) Delete
Name:	PIHAKIS, RACHEL	
Address:	135 N. SUMMERLIN AVE	
City-St-Zip:	SANFORD, FL 32771	
Title:	D	( ) Delete
Name:	KOVACH, MICHELLE	
Address:	1 STONE GATE NORTH	
City-St-Zip:	LONGWOOD, FL 32779	
Title:	D	( ) Delete
Name:	WILSON, NICOLE	
Address:	370 HANSON PKWY	
City-St-Zip:	SANFORD, FL 32773	

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:		
Title:	D	(X) Change ( ) Addition
Name:	NORDEN, LASHAWN	
Address:	5101 FILLMORE PLACE	
City-St-Zip:	SANFORD, FL 32773	
Title:	D	(X) Change ( ) Addition
Name:	ZIEGLER, JOHN	
Address:	1723 RUTLEDGE ROAD	
City-St-Zip:	LONGWOOD, FL 32779	

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: RACHEL ALANA PIHAKIS SD 04/11/2008

Electronic Signature of Signing Officer or Director — Date