

**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 17, 2005  
Secretary of State**

DOCUMENT# N93000001864

Entity Name: ORLANDO SENIOR BASEBALL ASSOCIATION, INC.

**Current Principal Place of Business:**

618 MAYFAIR DR  
ALTAMONTE SPRINGS, FL 32701

**New Principal Place of Business:**

**Current Mailing Address:**

618 MAYFAIR DR  
ALTAMONTE SPRINGS, FL 32701

**New Mailing Address:**

FEI Number:                      FEI Number Applied For ( )                      FEI Number Not Applicable (X)                      Certificate of Status Desired ( )

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

VOGLER, GILBERT  
618 MAYFAIR DR  
ALTAMONTE SPRINGS, FL 32701    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:                      DP                      ( ) Delete  
Name:                      VOGLER, GILBERT  
Address:                      618 MAYFAIR DR  
City-St-Zip:                      ALTAMONTE SPRINGS, FL 32701

Title:                      DS                      ( ) Delete  
Name:                      BEATTY, GEORGE  
Address:                      337 REDWING WAY  
City-St-Zip:                      CASSELBERRY, FL 32707

Title:                      DS                      ( ) Delete  
Name:                      CARPENTER, MIKE  
Address:                      5406 GLASGOW AVE.  
City-St-Zip:                      ORLANDO, FL 32819

**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:

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

DP

04/17/2005

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date