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FILED
May 14 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000002024 (8)

1. Corporation Name

FLORIDA STATE AMATEUR BASEBALL CONGRESS
INC.

Principal Place of Business

P.O. BOX 11131
SPRING HILL
SHADY HILLS FL 34610
US

Mailing Address

P.O. BOX 11131
SPRING HILL
SHADY HILL FL 34610-0131
US

2. Principal Place of Business

21 5500 34th St W
Suite, Apt. #, etc.

22

23 Bradenton Florida
City & State

Zip

24 34210

Country

25 USA

2a. Mailing Address

26 5500 34th St W
Suite, Apt. #, etc.

27

28 Bradenton Florida
City & State

Zip

29 34210

Country

30 USA

3. Date Incorporated or Qualified
05/03/1993

3a. Date of Last Report
05/01/1996

4. FEI Number
59-3122256

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

PEPITONE, JOSEPH E
9302 SPRING HILL DR.
SPRING HILL FL 34608

10. Name and Address of New Registered Agent

81 Name DANIEL B. LEE
82 Street Address (P.O. Box Number is Not Acceptable)
5500 34th St WEST
83
84 City Bradenton FL 85 Zip Code 34210

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Daniel B. Lee

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

4/27/97
DATE

12. OFFICERS AND DIRECTORS

TITLE DP ☒ DELETE
NAME PEPITONE, JOSEPH E
STREET ADDRESS 9302 SPRING HILL DR.
CITY-ST-ZIP SPRING HILL FL

TITLE D ☐ DELETE
NAME MCMILLAN, REED
STREET ADDRESS 1401 ESSEX DR.
CITY-ST-ZIP ST. PETERSBURG FL 33711

TITLE TS ☒ DELETE
NAME SURGINER, JOAN E.
STREET ADDRESS 11404 PALOMAR ST
CITY-ST-ZIP SPRING HILL FL

TITLE VPD ☒ DELETE
NAME PIERCE, JIM
STREET ADDRESS 1076 STRATTAN AVE
CITY-ST-ZIP SPRING HILL FL

TITLE D ☒ DELETE
NAME TORO, MANUEL
STREET ADDRESS 11456 SALTERS AVE
CITY-ST-ZIP SPRING HILL FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE DP ☒ Change ☐ Addition
1.2 NAME DANIEL B. LEE
1.3 STREET ADDRESS 5500 34th St W
1.4 CITY-ST-ZIP Bradenton FL 34210

2.1 TITLE DVP ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE DS ☒ Change ☒ Addition
3.2 NAME Ed Lisowski
3.3 STREET ADDRESS 4310 29th Ave N
3.4 CITY-ST-ZIP St. Pete FL 33713

4.1 TITLE DT ☒ Change ☒ Addition
4.2 NAME Palmer Muench
4.3 STREET ADDRESS 5500 34th St W
4.4 CITY-ST-ZIP Bradenton FL 34210

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13, if changed, or on an attachment with an address.

CR2E037 (9/96)