2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 22, 2005 8:00 am
Secretary of State
04-22-2005 90285 048 ****61.25

DOCUMENT # N93000002064

1. Entity Name
THE SARASOTA BASEBALL BOOSTERS, INC.

Principal Place of Business	Mailing Address
1390 HARBOR DRIVE SARASOTA, FL 34239	1390 HARBOR DRIVE SARASOTA, FL 34239

200426003

03222005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
2411 TEAL AVE Suite, Apt. #, etc.	2411 TEAL AVE Suite, Apt. #, etc.
City & State: SARASOTA FL	City & State: SARASOTA FL
Zip: 34232 Country: USA	Zip: 34232 Country: USA

4. FEI Number: 65-0411520 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CANNON, JOHN V III 1390 HARBOR DR. SARASOTA, FL 34239	Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CANNON, JOHN V III 1390 HARBOR DR. SARASOTA, FL 34239	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P HOERTZ, SHELLY 2411 TEAL AVE. SARASOTA, FL 34232	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P GIUMMO, TERESA 2411 TEAL AVE SARASOTA, FL 34232	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D METCALF, CLYDE 2411 TEAL AVE. SARASOTA, FL 34232	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	ST ERICKSON, BARB 2411 TEAL AVE. SARASOTA, FL 34232	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP DONAHUE, LISA 2411 TEDL AVE SARASOTA, FL 34232	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP GRAYBILL, MICHELLE 2411 TEAL AVE SARASOTA, FL 34232	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T HLAVACH, LORI 2411 TEAL AVE. SARASOTA, FL 34232	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with another like empowered.

SIGNATURE: Lori Hlavach 4.4.05 941.921.6049
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #