## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N93000004754

FILED Jan 14, 2007 Secretary of State

Entity Name: HOWARD-PALMETTO BASEBALL SOFTBALL ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 14941 S.W. 74 AVE. 2699 SO. BAYSHORE DRIVE MIAMI, FL 33158 300 MIAMI, FL 33133 **Current Mailing Address: New Mailing Address:** P.O. BOX 560672 MIAMI, FL 33256 US FEI Number: 65-0446103 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HINGSTON, BOB 8020 S.W. 135 ST US MIAMI, FL 33156 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete MACNAIR, CHRIS Name: Name: Address: 12450 PINE NEEDLE LANE Address: City-St-Zip: MIAMI, FL 33156 City-St-Zip: Title: Title: () Delete (X) Change ( ) Addition Name: SHORE, RICK Name: SHORE, RICK Address: 14941 SW 74 AVE. Address: 2699 SO. BAYSHORE DRIVE City-St-Zip: MIAMI, FL 33158 City-St-Zip: MIAMI, FL 33133 Title: DV () Delete Title: () Change () Addition HINGSTON, BOB Name: Name: 8020 SW 135 ST Address: Address: City-St-Zip: MIAMI, FL 33156 City-St-Zip: (X) Change ( ) Addition Title: SD ( ) Delete Title: SD Name: BARTOW, BOYD Name: REILLY, KEITH P.O. BOX 560672 Address: 14457 S.W. 144 COURT Address: City-St-Zip: MIAMI, FL 33186 City-St-Zip: MIAMI, FL 33256

I hereby certify that the information supplied with this filing does not qualify for the 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: RICK SHORE TREA 01/14/2007