## 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# N93000004754

RT FILED Aug 30, 2007 Secretary of State

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

| ,   |  | TALMETTO BAOLBALE OCT   | TB/LE/10000//TIC                            | 51 <b>1</b> , 11 <b>1</b> 0.                   |  |  |
|---|--|---|---|--|--|--|
| Current P   | rincipal Place   | of Business:  | New Principal Place of Business:            |  |  |  |
|   | BAYSHORE DF  | RIVE  |   |  |  |  |
| 300<br>MIAMI, FL                                  | 33133 US   |   |   |  |  |  |
| Current Mailing Address:                          |  |   | New Mailing Address:                        |  |  |  |
| P.O. BOX 560672<br>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:   |  |  |  |
|   | 135 ST<br>33156 US<br>named entity s<br>e of Florida.      | ubmits this statement for the p                                 | ourpose of changing it                      | ts registered                                  | d office or registered agent, or both, |  |
| 0.014, (1.01                                      |  | ic Signature of Registered Age                                  | ent   |  | Date                                   |  |
| OFFICERS AND DIRECTORS:                           |  |   | ADDITION                                    | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS    |  |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:       | PD ()<br>MACNAIR, CHR<br>12450 PINE NEI<br>MIAMI, FL 3315  | EDLE LANE   | Title:<br>Name:<br>Address:<br>City-St-Zip: |  | ( ) Change ( ) Addition                |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:       | T ()<br>SHORE, RICK<br>2699 SO. BAYS<br>MIAMI, FL 3313     |   | Title:<br>Name:<br>Address:<br>City-St-Zip: |  | ()Change ()Addition                    |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:       | DV ()<br>HINGSTON, BOI<br>8020 SW 135 S<br>MIAMI, FL 3315  | Т   | Title:<br>Name:<br>Address:<br>City-St-Zip: |  | ( ) Change ( ) Addition                |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:       | SD ()<br>REILLY, KEITH<br>P.O. BOX 56067<br>MIAMI, FL 3325 |   | Title:<br>Name:<br>Address:<br>City-St-Zip: |  | ( ) Change ( ) Addition                |  |
| Title:<br>Name:<br>Address:<br>City-St-Zip:       | ()   | Delete  | Title:<br>Name:<br>Address:<br>City-St-Zip: | T<br>DE LA FE, S<br>P.O. BOX 56<br>MIAMI, FL 3 |  |  |

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: RICK SHORE T 08/30/2007