

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT

1996



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

DOCUMENT # N93000005426 (2)

1. Corporation Name

WOODLAWN FLORIDA LITTLE MAJOR LEAGUE, INC.



Principal Place of Business

% THOMAS E. DEBERG
1416 2ND STREET. N
ST. PETERSBURG FL 33704

Mailing Address

% THOMAS E. DEBERG
1416 2ND STREET. N
ST. PETERSBURG FL 33704

3. Date Incorporated or Qualified
12/02/1993

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

21

2a. Mailing Address

26

4. FEI Number

59-3204766

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

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

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

N/A

DEBERG, THOMAS E ESQ.
% THE FLORIDA BAR
SUITE C-49, TAMPA AIRPORT MARRIOTT
TAMPA FL 33607

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME
DEBERG, THOMAS E
STREET ADDRESS
1416 4TH STREET NORTH
CITY - ST - ZIP
ST. PETERSBURG FL 33704

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

TITLE ☐ DELETE

NAME
MICHAEL, SHERRY
STREET ADDRESS
3820 NORTH 21 ST
CITY - ST - ZIP
ST. PETERSBURG FL

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

TITLE ☒ DELETE

NAME
JONES, WILLIAM
STREET ADDRESS
4635 EMERSON AVE S
CITY - ST - ZIP
ST. PETERSBURG FL 33711

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

TITLE ☒ DELETE

NAME
MCENEEA, JACKIE
STREET ADDRESS
1461 27TH AVENUE NORTH
CITY - ST - ZIP
ST. PETERSBURG FL 33704

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

TITLE ☐ DELETE

NAME
AMADOR, MIGUEL
STREET ADDRESS
2578 N 34 AVE
CITY - ST - ZIP
ST. PETERSBURG FL

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

TITLE ☒ DELETE

NAME
AMADOR, MIGUEL
STREET ADDRESS
2578 34TH AVENUE NORTH
CITY - ST - ZIP
ST. PETERSBURG FL 33714

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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Thomas E. DeBerg Thomas E. DeBerg

2-15-96

813-875-9821

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)