2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004 8:00 am
Secretary of State
04-30-2004 90364 041 ****61.25

DOCUMENT # N94000002081

1. Entity Name
LITTLE LEAGUE OF THE GULF BEACHES, INC.

Principal Place of Business	Mailing Address
200 REX PLACE MADEIRA BEACH, FL 33708	P.O. BOX 8548 MADIERA BEACH, FL 33738

03232004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-3244423 ☐ 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
WARD, TERESA C ESQ. 5322 DUHME ROAD ST. PETERSBURG, FL 33708	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, 2004

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	PD LIBERATONE, JOSEPH 6026 OAKHURST DRIVE SEMINOLE, FL 33772	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition Liberatore
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD PLUSKAT, TAMMY 15912 REDINGTON DR SAINT PETERSBURG, FL 33708	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition Redington Beach
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD YASCA, BETH 10182 65TH AVE N SEMINOLE, FL 33772	☒ Delete	TITLE SD / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition Kirk, Debbie 11437 48th Ave. N. St. Petersburg, FL 33708
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD KYES, ROSE 15409 CATALINA CIRCLE SEMINOLE, FL 33776	☒ Delete	TITLE VD / NAME / STREET ADDRESS / CITY-ST-ZIP	☒ Change ☐ Addition Hunt, Clifford 5415 Bates St. Seminole, FL 33772
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ 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 all other like empowered.

SIGNATURE: Tammy S Pluskat Tammy S.Pluskat 4/3/04 727-399-8306
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #