

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004976

FILED
May 05, 2005
Secretary of State

Entity Name: NORTH SPRINGS LITTLE LEAGUE, INC.

Current Principal Place of Business:

5110 N.W. 106 TERRACE
CORAL SPRINGS, FL 33076 US

New Principal Place of Business:

Current Mailing Address:

5110 N.W. 106 TERRACE
CORAL SPRINGS, FL 33076 US

New Mailing Address:

FEI Number: 65-0525955 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

MUCCI, MARK S ESQ.
BENSON, MUCCI & ASSOCIATES, LLP
ONE FINANCIAL PLAZA, STE. 1600
FORT LAUDERDALE, FL 333941697 US

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:

Title: PD () Delete
Name: SOHN, MILES
Address: 5410 N.W. 121 AVENUE
City-St-Zip: CORAL SPRINGS, FL 33076

Title: DV () Delete
Name: BURZESI, MICHAEL
Address: 5459 NW 106 DRIVE
City-St-Zip: CORAL SPRINGS, FL 33067

Title: D () Delete
Name: MUCCI, MARK
Address: 5110 N.W. 106 TERRACE
City-St-Zip: CORAL SPRINGS, FL 33076

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DS (X) Change () Addition
Name: VASPASIANO, ANDY
Address: 8422 NW 47TH ST
City-St-Zip: CORAL SPRINGS, FL 33067

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ANDY VASPASIANO

DS

05/05/2005

Electronic Signature of Signing Officer or Director

Date