

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000005843

FILED
Apr 09, 2006
Secretary of State

Entity Name: FLORIDA WEST BASEBALL UMPIRE ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 21011
SARASOTA, FL 34276 US

New Principal Place of Business:

P.O. BOX 52338
SARASOTA, FL 34232 US

Current Mailing Address:

P.O. BOX 21011
SARASOTA, FL 34276 US

New Mailing Address:

P.O. BOX 52338
SARASOTA, FL 34232 US

FEI Number: 65-0553284

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAWN, MICHAEL A
1786 BRIAR CREEK LANE
SARASOTA, FL 34235 US

Name and Address of New Registered Agent:

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: TS () Delete
Name: HAWN, MICHAEL A
Address: 1786 BRIAR CREEK LANE
City-St-Zip: SARASOTA, FL 34235

Title: BAD () Delete
Name: KOZLOWSKI, RONALD D
Address: 2918 MARSHALL DRIVE
City-St-Zip: SARASOTA, FL 34239

Title: PD () Delete
Name: LOCRASTO, TOM
Address: 4076 LINWOOD ST
City-St-Zip: SARASOTA, FL 34232

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 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: MICHAEL A. HAWN

TREA

04/09/2006

Electronic Signature of Signing Officer or Director

Date