

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N94000006155 (5)

1. Corporation Name

SOUTH DAYTONA-HALIFAX LITTLE LEAGUE, INC.

Principal Place of Business

444 SEABREEZE BLVD.
SUITE 800
DAYTONA BEACH FL 32118

Mailing Address

P.O. BOX 15110
DAYTONA BEACH FL 32115



3. Date Incorporated or Qualified
12/16/1994

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

2. Principal Place of Business

2a. Mailing Address

21 1727 1/2 Eastern Rd.

26 Suite, Apt. #, etc.

4. FEI Number
59-3294535

Applied For
Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

23 S. Daytona, FL

28 City & State

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24 32119 25 USA

29 Zip Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DORAN, THEODORE R
444 SEABREEZE BLVD.
SUITE 800
DAYTONA BEACH FL 32118

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 re-statuting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE
NAME DASCOLI, CAROL
STREET ADDRESS 1939 BLAKE PLACE
CITY-ST-ZIP SOUTH DAYTONA FL 32119

1.1 TITLE Hopkins, Carol ☐ Change ☒ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE S ☐ DELETE
NAME NORWOOD, PAMELA
STREET ADDRESS 1899 MAGNOLIA AVE.
CITY-ST-ZIP SOUTH DAYTONA FL 32119

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE DT ☐ DELETE
NAME GOLDSTONE, HENRY
STREET ADDRESS 112 BEVERLY TERRACE
CITY-ST-ZIP DAYTONA BEACH FL 32127

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME DONAHUE, LYNN
STREET ADDRESS 1970 MENDER CIRCLE
CITY-ST-ZIP SOUTH DAYTONA FL 32119

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE P ☐ DELETE
NAME ROWE, JAN
STREET ADDRESS CHERRY ST.
CITY-ST-ZIP SOUTH DAYTONA FL 32119

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME NORWOOD, PAM
STREET ADDRESS 1899 MAGNOLIA AVE.
CITY-ST-ZIP SOUTH DAYTONA FL 32119

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:

Carol H. Hopkins
Carol H. Hopkins

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/96

Date

904-322-3070

Daytime Phone #

CR2E037 (12/95)