

FILE NOW: FILING FEE IS \$61.25

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Apr 14 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N95000000639 (3)**

1. Corporation Name

LADY LAKE LITTLE LEAGUE, INC.



Principal Place of Business	Mailing Address
23 SPENCER LANE LADY LAKE FL 32159	P.O. BOX 1472 LADY LAKE FL 32158-1472

3. Date Incorporated or Qualified 02/06/1995	3a. Date of Last Report 06/18/1996
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2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 SAME AS ABOVE
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country

4. FEI Number APPLIED FOR 59-3294309	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent	
RATLIFF, KELLY 123 SPENCER LANE LADY LAKE FL 32159	

10. Name and Address of New Registered Agent	
81 Name PHILIP D. PURLEE	
82 Street Address (P.O. Box Number is Not Acceptable) 3450 SPENCER HILL DR.	
83	
84 City & State FRUITLAND PARK FL	85 Code 34731

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 **X Philip D. Purlee** DATE **3/31/97**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		
TITLE	NAME	<input checked="" type="checkbox"/> DELETE
STREET ADDRESS	123 SPENCER LANE	
CITY-ST-ZIP	LADY LAKE FL 32159	
TITLE	NAME	<input checked="" type="checkbox"/> DELETE
STREET ADDRESS	616 1ST AVE.	
CITY-ST-ZIP	LADY LAKE FL 32159	
TITLE	NAME	<input checked="" type="checkbox"/> DELETE
STREET ADDRESS	616 1ST AVE.	
CITY-ST-ZIP	LADY LAKE FL 32159	
TITLE	NAME	<input type="checkbox"/> DELETE
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	NAME	<input type="checkbox"/> DELETE
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
1.1 TITLE	NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	PHILIP D. PURLEE	
1.3 STREET ADDRESS	3450 SPENCER HILL DR.	
1.4 CITY-ST-ZIP	FRUITLAND PARK, FLA. 34731	
2.1 TITLE	NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	CHERYL C. TATE	
2.3 STREET ADDRESS	103 CUTOFF ROAD	
2.4 CITY-ST-ZIP	FRUITLAND PARK, FLA. 34731	
3.1 TITLE	NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	TEODY L. ELWOOD	
3.3 STREET ADDRESS	35124 DAWN DRIVE	
3.4 CITY-ST-ZIP	LESSBURG, FLA. 34788	
4.1 TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> 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 does not qualify for the exemption stated in Section 119.07(3)(i), 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 **X Philip D. Purlee** DATE **3/31/97**

CR2E037 (9/96)