2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000884

FILED Apr 29, 2008 Secretary of State

Entity Name: NORTHSIDE BAT & BALL LITTLE LEAGUE, INC.

	rincipal Place of Business:	New Principal Place of Business:
1306 AVEI FT. PIERC	NUE 0 E, FL 34950 US	
Current M	lailing Address:	New Mailing Address:
	FICE BOX 1656	
T. PIERC	CE, FL 34950	
FEI Number	: 69-1166950 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()
Name and	Address of Current Registered Agent	: Name and Address of New Registered Agent:
JOSUE`, [2310 AVEI FORT PIE		
	named entity submits this statement for teleof Florida.	he purpose of changing its registered office or registered agent, or both
SIGNATUI		<u> </u>
	Electronic Signature of Registered	Agent Date
OFFICER	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO
Γitle: Name: Address:	PD () Delete JOSUE`, DIANA D 2310 AVENUE N	Title: () Change () Addition Name: Address:
	FORT PIERCE, FL 34950	City-St-Zip:
City-St-Zip: Fitle: Name: Address:	FORT PIERCE, FL 34950 VP () Delete MCCUTCHEN, DEBRA 4600 EVERGREEN AVENUE FORT PIERCE, FL 34947	
City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	VP () Delete MCCUTCHEN, DEBRA 4600 EVERGREEN AVENUE	City-St-Zip: Title: () Change () Addition Name: Address:
City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: City-St-Zip: Fitle: Name: Address: Address:	VP () Delete MCCUTCHEN, DEBRA 4600 EVERGREEN AVENUE FORT PIERCE, FL 34947 SD () Delete WHITFIELD, ANITA 705 DUNDAS COURT	City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:
City-St-Zip: City-St-Zip: City-St-Zip: City-St-Zip: City-St-Zip: City-St-Zip: City-St-Zip: City-St-Zip: City-St-Zip: Address: Address:	VP () Delete MCCUTCHEN, DEBRA 4600 EVERGREEN AVENUE FORT PIERCE, FL 34947 SD () Delete WHITFIELD, ANITA 705 DUNDAS COURT FORT PIERCE, FL 34950 OD () Delete BURNS, ANN 1205 NORTH 21ST STREET	City-St-Zip: 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 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:	DIANA JOSUE'	PD	04/29/2008
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