

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000959

FILED
Mar 23, 2009
Secretary of State

Entity Name: FORT WHITE YOUTH BASEBALL ASSOCIATION INC.

Current Principal Place of Business:

17828 SW SR 47
FT WHITE, FL 320380044

New Principal Place of Business:

Current Mailing Address:

PO BOX 44
FT WHITE, FL 320380044

New Mailing Address:

FEI Number: 22-0001115

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SHARPE, CHRISTOPHER
366 SW THISTLEDEW GLN
LAKE CITY, FL 32024 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: PD () Delete
Name: SHARPE, CHRISTOPHER
Address: 366 SW THISTLEDEW GLN
City-St-Zip: LAKE CITY, FL 32024

Title: SD () Delete
Name: SHARPE, TAMMY
Address: 366 SW THISTLEDEW GIN
City-St-Zip: LAKE CITY, FL 32024

Title: TD () Delete
Name: PARKER, JOYE
Address: 3318 SE CR 18
City-St-Zip: LAKE CITY, FL 32025

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 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: TAMMY SHARPE

SD

03/23/2009

Electronic Signature of Signing Officer or Director

Date