

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004705

FILED  
Apr 30, 2008  
Secretary of State

**Entity Name:** TOM BROWN PARK LITTLE MAJOR LEAGUE ASSOCIATION, INC.

**Current Principal Place of Business:**

EASTERWOOD DRIVE  
TALLAHASSEE, FL 32301

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 14798  
TALLAHASSEE, FL 32317 US

**New Mailing Address:**

**FEI Number:** 59-3393860

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COOKSEY, SUSAN  
1342 OLD ST. AUGUSTINE RD  
MONTICELLO, FL 32344 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: P ( ) Delete  
Name: COOKSEY, SUSAN  
Address: 1342 OLD ST. AUGUSTINE ROAD  
City-St-Zip: MONTICELLO, FL 32344

Title: V ( ) Delete  
Name: CILEK, MARY  
Address: 1383 DEVONSHIRE DR  
City-St-Zip: TALLAHASSEE, FL 32317

Title: T (X) Delete  
Name: SUMMER, SHARI  
Address: 3261 ADDISON LANE  
City-St-Zip: TALLAHASSEE, FL 32317

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VP (X) Change ( ) Addition  
Name: GREUBEL, ROXIE  
Address: 7921 MALLARD HILL DR  
City-St-Zip: TALLAHASSEE, FL 32309

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: ROXIE GREUBEL

VP

04/30/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date