2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001991

FILED Apr 10, 2012 Secretary of State

Entity Name: BAKER COUNTY LITTLE LEAGUE, INC.

Current Principal Place of Business: New Principal Place of Business:

OHIO AVE #8TH ST SWC MACCLENNY, FL 32063

Current Mailing Address: New Mailing Address:

POST OFFICE BOX 762 GLEN ST. MARY, FL 32040

FEI Number: 59-2320522 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:

COMBS, DONALD
5101 LEWIS COVEN RD
MACCLENNY, FL 32063 US
HATHCOX, LORA M
14624 WESLEY GRIFFIS LN
SANDERSON, FL 32087 US

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: LORA M HATHCOX 04/10/2012

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD

Name: CARTER, JERRY Address: 11212 CR 125 N

City-St-Zip: GLEN ST MARY, FL 32040

Title: ID

Name: BURNSED, MELISSA
Address: RT 1, BOX 2169-A
City-St-Zip: ST. GEORGE, GA 31646

Title: PA

Name: HIGH, TERI

Address: 904 CHRISTIE COURT City-St-Zip: MACCLENNY, FL 32063

Title: VP

Name: MILLER, WILLIAM

Address: 1129 COPPERFIELD CIRCLE City-St-Zip: MACCLENNY, FL 32063

Title:

Name: HATHCOX, LORA

Address: 14624 WESLEY GRIFFIS LN City-St-Zip: SANDERSON, FL 32087

Title:

Name: WILSON, ROSA
Address: 14177 CAMELOT PLACE
City-St-Zip: MACCLENNY, FL 32063

I hereby 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 all other like empowered.

SIGNATURE: LORA M HATHCOX T 04/10/2012