

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005652

FILED  
Apr 18, 2011  
Secretary of State

**Entity Name:** SOUTHWESTERN PORT ST. LUCIE LITTLE LEAGUE, INC.

**Current Principal Place of Business:**

800 SW DARWIN BLVD  
PORT ST. LUCIE, FL 34953

**New Principal Place of Business:**

**Current Mailing Address:**

3209 SW PORT ST LUCIE BLVD  
PMB 129  
PORT ST. LUCIE, FL 34987

**New Mailing Address:**

10380 SW VILLAGE CENTER DRIVE  
SUITE 345  
PORT ST LUCIE, FL 34987

**FEI Number:** 59-2156222

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

LEWIS, SHAWN  
3971 SW LAFFITE STREET  
PORT ST. LUCIE, FL 34953 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  
Name: LEWIS, SHAWN  
Address: 3971 SW LAFFITE STREET  
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: VPD  
Name: RIZZO, AL  
Address: 882 SW WORCHESTER LANE  
City-St-Zip: PORT ST. LUCIE, FL 34953

Title: TD  
Name: TRIMARCO, ROBERT  
Address: 11414 SW FIELDSTONE WAY  
City-St-Zip: PORT ST. LUCIE, FL 34987

Title: SD  
Name: HURLEY, JAMIE  
Address: 2309 SW ANTIQUERA STREET  
City-St-Zip: PORT SAINT LUCIE, FL 34953

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: ROBERT TRIMARCO

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04/18/2011

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

\_\_\_\_\_  
Date