FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT #
1. Corporation Name

N96000006558 (8)

SOUTHWEST FLORIDA YOUTH BASEBALL CLUB, INC.

Principal Place of Business

Mailing Address

FILED Apr 30 1997 8:00am Secretary of State



4806 LAUREL LN. FT. MYERS FL 33906-2023		2. Data transported to Outfled	I So Date of Lost Di		
			3. Date incorporated or Qualified 12/20/1996	3a. Date of Last Re	epon
2. Principal Place of Business Q 2a. Mailing Address Q			4. FEI Number	MAp.	plied For
21 15560 Mc GREGOR BLYD. 26 15560 Mc GREGOR B.			Not Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc. 27			5. Certificate of Status Desired	□ \$8.75 A Fee Re	
City & State T. My EAS, FL.		FL.	Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	
Zip Country Zip Country 33908 Country 25 U.S.A 29 33908 S0 U.S.A Florida Statutes Yes 10 No					199.032,
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent					
81 Name			WINROW, GARY		
MYERS, JEFFREY L 1342 COLONIAL BLVD., STE. E 40A	82 Street Address (P.O. Box Number is Not Acceptable)				
FT. MYERS FL 33907		83	+ DUG LHAREL L	770 14	
		84 City	Fr. MyERS	FL 85 Zip (408
11. Pursuant to the provisions of Section 617.0502 and 6	17.1508, Florida Statutes, the	above-named corpo		urpose of changing its	s registered
11. Pursuant to the provious of Section 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered/agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar thing and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE WWW 4/21/97					ĺ
Signature typed or plinted name of registered agent and title		ered Agent signature require		DATE	
12. OFFICERS AND DIREC		3.	ADDITIONS/CHANGES TO OFFIC		
TITLE DP NAME WINROW, GARY	_	1 TITLE 2 NAME		Change	Addition a
NAME WINHOW, GARY STREEL ADDRESS 4806 LAUREL LN.		3 STREET ADDRESS			[8]
CITY-ST-ZIP FT. MYERS FL 33908		4 CITY-ST-ZIP			B)E(037
TITLE DT		1 TITLE		☐ Change	Addition
NAME VANVOORHIS, JOHN R	2:	2 NAME			
STREET ADDRESS 5350 CHIPPENDALE CIR.	2:	3 STREET ADDRESS			
CITY-ST-ZIP FT. MYERS FL 33919		4 CITY-ST-ZIP			
TITLE DV	DELETE 3.	1 TITLE		Change	Addition
NAME GILL, EARL	3.3	2 NAME			
STREET ADDRESS 1593 MANCHESTER BLVD.	3.3	3 STREET ADDRESS			
CITY-ST-ZIP FT. MYERS FL 33919		4. CITY-ST-ZIP		☐ Change	Addition
TITLE DS NAME LAVENDER, JIM		1 TITLE 2 NAME		L Change	L. ROUIIOI
STREET ADDRESS 1463 POINSIANA AVE.	B "	3 STREET ADDRESS			
CITY-SI-ZIP FT. MYERS FL 33901		4 CITY-ST-ZIP			
TITLE D	T 1 25. 556	1 TITLE		Change	Addition
NAME MITCHELL, WILLIAM	_	2 NAME			1
STREET ADDRESS 8140 COUNTRY RD., STE. 205	i	3 STREET ADDRESS	•		
CITY-ST-ZIP FT. MYERS FL 33919	5.	4 CITY-ST-ZIP			
TITLE					Addistry
	DELETE 6.	1 TITLE		Change	Addition
NAME		2 NAME		∟, Change	Addition
NAME STREET ADDRESS	6.	1		∟ Change	L_1 ADDITION