

2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**FILED
Sep 27, 2005
Secretary of State**

DOCUMENT# N97000001046

Entity Name: POMPANO BEACH YOUTH BASEBALL, INC.

Current Principal Place of Business:

C/O ERIC FOUST
8025 LAGOS DE CAMPO BLVD
TAMARAC, FL 33321

New Principal Place of Business:

Current Mailing Address:

C/O ERIC FOUST
8025 LAGOS DE CAMPO BLVD
TAMARAC, FL 33321

New Mailing Address:

FEI Number: 65-0731328 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOUST, ERIC
8025 LAGOS DE CAMPO BLVD.
TAMARAC, FL 33321 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: ERIC FOUST

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DVP () Delete
Name: HOOPS, BEN
Address: 5290 NE 17TH AVE
City-St-Zip: POMPANO BEACH, FL 33064

Title: D () Delete
Name: GLUTH, JEFF
Address: 80 SE 10TH ST
City-St-Zip: POMPANO BEACH, FL 33060

Title: DP () Delete
Name: FOUST, ERIC
Address: 8025 LAGOS DE CAMPO BLVD
City-St-Zip: TAMARAC, FL 33321

Title: D () Delete
Name: GROBAN, GARY
Address: 861 N.E. 9TH AVENUE
City-St-Zip: POMPANO BEACH, FL 33060

Title: D () Delete
Name: ARNOLD, KEN
Address: 721 NE 8TH ST
City-St-Zip: POMPANO BEACH, FL 33060

Title: D () Delete
Name: DAVIS, BRAD
Address: 230 SE 6 COURT
City-St-Zip: POMPANO BEACH, FL 33060

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:

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 for the exemption stated in Section 119.07(3)(i), 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: BEN HOOPS

Electronic Signature of Signing Officer or Director

DVP

09/27/2005

Date