2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002697

FILED Feb 25, 2008 Secretary of State

Entity Name: PLANT CITY LITTLE LEAGUE, INC. **Current Principal Place of Business: New Principal Place of Business:** MIKE SANSONE PARK PARK ROAD PLANT CITY, FL 33564 **New Mailing Address: Current Mailing Address:** P.O. BOX 1471 PLANT CITY, FL 33564 FEI Number: 59-2215822 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: ROBERTS, JENNIFER BYARS, DAVE 1329 MITCHELL STREET 1807 HITCHING POST LANE LAKELAND, FL 33801 PLANT CITY, FL 33566 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: DAVE BYARS 02/25/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete BYARS, DAVE Name: Name: Address: 1807 HITCHING POST PLACE Address: City-St-Zip: PLANT CITY, FL 33566 US City-St-Zip: Title: () Delete Title: () Change () Addition Name: CAULEY, TRICIA Name: Address: 3308 MUDULLA ROAD Address: City-St-Zip: PLANT CITY, FL 33566 City-St-Zip: Title: () Delete Title: (X) Change () Addition ROBERTS, JENNIFER Name: SEGUIN, KERRI Name: 1329 MITCHELL STREET 3306 MILTON PLACE Address: Address: City-St-Zip: LAKELAND, FL 33801 City-St-Zip: PLANT CITY, FL 33566 Title: () Delete Title: () Change () Addition Name: KNOTTS, ANDY Name: Address: 2511 MCGEE RD Address: City-St-Zip: PLANT CITY, FL 33565 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: KERRI SEGUIN T 02/25/2008