

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002697

FILED
Mar 07, 2009
Secretary of State

Entity Name: PLANT CITY LITTLE LEAGUE, INC.

Current Principal Place of Business:

MIKE SANSONE PARK
PARK ROAD
PLANT CITY, FL 33564 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1471
PLANT CITY, FL 33564

New Mailing Address:

FEI Number: 59-2215822

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BYARS, DAVE
1807 HITCHING POST LANE
PLANT CITY, FL 33566 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: P () Delete
Name: BYARS, DAVE
Address: 1807 HITCHING POST PLACE
City-St-Zip: PLANT CITY, FL 33566 US

Title: V () Delete
Name: CAULEY, TRICIA
Address: 3308 MUDULLA ROAD
City-St-Zip: PLANT CITY, FL 33566

Title: T () Delete
Name: SEGUIN, KERRI
Address: 3306 MILTON PLACE
City-St-Zip: PLANT CITY, FL 33566

Title: V (X) Delete
Name: KNOTTS, ANDY
Address: 2511 MCGEE RD
City-St-Zip: PLANT CITY, FL 33565

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: KNOTTS, ANDY
Address: 2511 MCGEE RD
City-St-Zip: PLANT CITY, FL 33565

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 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

03/07/2009

Electronic Signature of Signing Officer or Director

Date