

FILE NOW: FILING FEE IS \$61.25

FILED

98 FEB -2 AM 9:50

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



NONPROFIT CORPORATION
ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N97000004155 (4)

1. Corporation Name

PALM HARBOR AMERICAN LITTLE LEAGUE, INC.

Principal Place of Business

Mailing Address

1968 BAYSHORE BLVD.
DUNEDIN FL 34698

1968 BAYSHORE BLVD.
DUNEDIN FL 34698

3. Date Incorporated or Qualified

07/22/1997

4. FEI Number

59-3453566

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?

Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CIANFRONE, JOSEPH R
1968 BAYSHORE BLVD.
DUNEDIN FL 34698

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.0508, 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 with, and accept the obligations of Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Jan 10, 1998

12. OFFICERS AND DIRECTORS

TITLE	DP	<input type="checkbox"/> DELETE
NAME	LONG, THOMAS	
STREET ADDRESS	2957 SHANNON CIRCLE	
CITY-ST-ZIP	PALM HARBOR FL 34684	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	ELDER, CARL	
STREET ADDRESS	195 MONTROSE CT.	
CITY-ST-ZIP	PALM HARBOR FL 34684	
TITLE	DS	<input type="checkbox"/> DELETE
NAME	HOFSTETTER, LISA	
STREET ADDRESS	720 ROLLING HILL DR.	
CITY-ST-ZIP	PALM HARBOR FL 34683	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	MIDGETTE, KAREN	
STREET ADDRESS	2884 LONG LEAF LANE	
CITY-ST-ZIP	PALM HARBOR FL 34684	
TITLE	D	<input type="checkbox"/> DELETE
NAME	KOCHENOUR, BILL	
STREET ADDRESS	248 SHORE DR.	
CITY-ST-ZIP	PALM HARBOR FL 34683	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	FRANK EISEL	
1.3 STREET ADDRESS	1599 SANDY HOLLOW LANE.	
1.4 CITY-ST-ZIP	PALM HARBOR FL 34698	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	400002420834--6	
2.3 STREET ADDRESS	-02/04/98--01012--001	
2.4 CITY-ST-ZIP	*****96.25 *****61.25	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Frank Eisel
FRANK EISEL - 11 1998

CR2E037 (10/97)