## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED

98 FEB -2 AM 9: 50

SECRETARY OF STATE TALLAHASSFE. FLORIDA

DOCUMENT	# N97000	004155 (4	<b>!)</b>	_
PALM HARBOR AMERICAN LITTLE LEAGUE, INC.				Q00 2-4
•				
Principal Place of Business		Mailing Address		( SOOMINE DID HOUS HOUSE DOING BOILD
1968 BAYSHORE BLVD. 1968 BAYSHORE BLVD. DUNEDIN FL 34698 DUNEDIN FL 34698				3. Date Incorporated or Qualified
		P. 01 (12 01 01 01 01 01 01 01 01 01 01 01 01 01		07/22/1997 4. FEL Number Applied For
				59-3453566 Not Applicable
2. Principal Place of Business		2a. Mailing Address		Certificate of Status Desired      \$8.75 Additional     Fee Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing \$5.00 May Be
22		27 City & State		Trust Fund Contribution Added to Fees
City & State		City & State		7. Is this nonprofit corporation a homeowners association?
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year Intangible
24 2		29	30	Personal Properly Tax due June 30. Yes No  10. Name and Address of New Registered Agent
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name				
CIANFRONE, JOSEPH R			82 Stree	et Address (P.O. Box Number is Not Acceptable)
1988 BAYSHORE BLVD.				or readings (1. o. box realise) to the readings
DUNEDIN FL 34698			83	
			84 City	
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 register 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 sen familiar with, and accept the obligations of Section 617,0503, Florida Statutes.				
agent. I am familiar with, and accept the obligations of Section 617.0503, Florida Statutes.				
SIGNATURESignature, Typod &	prighed name of registered ageny's	ng file if applicable. (NC	TE: Registered Agent signatu	lure regulred when reinstaling)  DATE
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE DP	101110	☐ DELETE	1.1 TITLE	PRESIDENT Maddition
NAME LONG, TH	NNON CIRCLE		1.2 NAME 1.3 STREET ADDRESS	FRANK EISEL  1599 SANDY HOLLOW LANE;
	RBOR FL 34684		1.4 CITY-ST-ZIP	PALM FLARBOR FL 34698
TITLE DV		☐ DELETE	2.1 TITLE	4000024208346
NAME ELDER, C			2.2 NAME	-02/04/9901012001
	trose Ct. RBOR FL 34684		2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	*****96,25 *****61.25
TITLE DS	WALL P ALANT	☐ DELETE	3.1 TITLE	Change Addition
NAME HOFSTET			3.2 NAME	
	ING HILL DR.		3.3 STREET ADDRESS	SS
TITLE DT	RBOR FL 34683	DELETE	3.4. CITY - ST - ZIP 4.1 TITLE	Change Addition
NAME MIDGETTI	E. KAREN		4. 2 NAME	
	G LEAF LANE		4.3 STREET ADDRESS	ss
	RBOR FL 34684	Dry 6th	4.4 CITY - ST- ZIP	
TITLE D NAME KOCHEN	NID DILL	DELETE	5.1 TITLE 5.2 NAME	Change Addition
NAME KOCHENO STREET ADDRESS 248 SHOP			5.2 NAME 5.3 STREET ADDRESS	s
	RBOR FL 34683		5.4 CITY-ST-ZIP	
TITLE		☐ D€LE₹E	6.1 TITLE	☐ Change ☐ Addition
I				
NAME			6.2 NAME	
NAME STREET ADDRESS CITY-ST-ZIP	^	<i>-</i> 0	6.2 NAME 6.3 STREET ADDRESS 6.4 City-St-Zip	is l

14. I hereby certify that the information supplied with this filling 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 suppliered aliquial report in the annual report in the project of the cort of the cort

CICHIATURE

MANKER Day 11 199