## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 11, 2007 8:00 am Secretary of State

DOCUMENT # N9700004162  1. Entity Name PALM HARBOR NATIONAL LITTLE LEAGUE, INC.						04-11-2007 90033 046 ****61.25					
	e of Business MON BEAR TRAIL DR, FL 34684	Mailing Address P.O. BOX 640 PALM HARBOR, FL 346			·						
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2. Principal P	3. Mailing Address										
Suite, Apt.	Forest Drive	Suite, Apt. #, etc.				03252007	Chg-NP	CR2E	037 (12/06)		
City & State	e FL	City & State	•			4. FEI Numbe 59-3452				pplied For	
Zip 3467	Country	Zip	Cou	entry		5. Certificate	-	red 🔲	\$8.75 Ad	ditional	
2 10 1	6. Name and Address of Current R	Registered Agent			1	7. Name and	Address of N	lew Registere	<u> </u>		
2MALLINA/	LINDA			Name 7	300	ckim an	V.in-	-			
WILLIAMS, LINDA 2893 CINNAMON BEAR TRAIL PALM HARBOR, FL 34684				Street Add	eel Address (P.O. Box Number is Not Acceptable)  813 Forest Drive						
7712101121	NON, TE 01001										
				City OI	dsm	)AC		F	L Zip Coo	£77	
8. The above	named entity submits this statement for ions of registered agent.	<i>i</i>	registere	ed office or re	gistere	ed agent, or bot	th, in the State	of Florida. I a	m familiar with	and accept	
SIGNATURE .	Kim Brozk	Brockman man, Presi	den	t				4/21	107		
	Signature, typed or printed name of registered agent ar	nd title if applicable. (NOTE	: Registered	d Agent signature r	required v	vhen reinstating)		DATE	<b>፤</b>		
· · · · · · · · · · · · · · · · · · ·	Filling Fee is \$61.25 Due by May 1, 2007	9. Election Cam Trust Fund C	npaign Fi	inancing		shen reinstating)  \$5.00 May B Added to Fees	e		eck payable t artment of S		
10.	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS AND DIRE	9. Election Cam Trust Fund C	npaign Fi	inancing ion.	] ;	\$5.00 May B		Florida Dep	artment of S	tate	
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kan Brokman Kim Brockman
SIGNATURE: Man Brokman Kim Brockman

4/22/0

727-647-2985 Daytime Phone #