

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004987

FILED  
Jan 23, 2008  
Secretary of State

Entity Name: SPACE COAST LITTLE LEAGUE, INC.

## Current Principal Place of Business:

488 INDIAN CREEK DRIVE  
COCOA BEACH, FL 32931

## New Principal Place of Business:

## Current Mailing Address:

PO BOX 321522  
COCOA BEACH, FL 32932

## New Mailing Address:

FEI Number: 59-3484000

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KONTOS, JAMES  
488 INDIAN CREEK DRIVE  
COCOA BEACH, FL 32931 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: KONTOS, JAMES  
Address: 488 INDIAN CREEK DRIVE  
City-St-Zip: COCOA BEACH, FL 32931

Title: D ( ) Delete  
Name: DINENNO, HENRY  
Address: PO BOX 321522  
City-St-Zip: COCOA BEACH, FL 32932

Title: S ( ) Delete  
Name: PORTEOUS, PENNY  
Address: PO BOX 321522  
City-St-Zip: COCOA BEACH, FL 32932

Title: DT ( ) Delete  
Name: BEVILACQUA, LAURA  
Address: PO BOX 321522  
City-St-Zip: COCOA BEACH, FL 32932

Title: D (X) Delete  
Name: SPENCER, NEIL  
Address: PO BOX 321522  
City-St-Zip: COCOA BEACH, FL 32932

Title: D (X) Delete  
Name: SPENCER, DONNA  
Address: PO BOX 321522  
City-St-Zip: COCOA BEACH, FL 32932

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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: LAURA BEVILACQUA

D

01/23/2008

Electronic Signature of Signing Officer or Director

Date