

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Sep 09, 2010
Secretary of State

DOCUMENT# N97000006016

Entity Name: NORTH FORT MYERS NATIONAL LITTLE LEAGUE, INC.**Current Principal Place of Business:**NORTH FORT MYERS COMMUNITY PARK
2021 N. TAMIAMI TRAIL
N FT MYERS, FL 33917**New Principal Place of Business:****Current Mailing Address:**P O BOX 3551
N FT MYERS, FL 33918**New Mailing Address:****FEI Number:****FEI Number Applied For ()****FEI Number Not Applicable (X)****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**PAZ, DENISE
2021 N. TAMIAMI TRAIL
NORTH FORT MYERS, FL 33917 US**Name and Address of New Registered Agent:**LEMMERMAN, BILL
2021 N. TAMIAMI TRAIL
NORTH FORT MYERS, FL 33917 US

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: BILL LEMMERMAN

09/09/2010

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PRES
Name: LEMMERMAN, BILL
Address: PO BOX 3551
City-St-Zip: NORTH FORT MYERS, FL 33918 US

Title: V.P.
Name: SOLETTI, JOHN
Address: PO BOX 3551
City-St-Zip: N FT MYERS, FL 33917 US

Title: SEC
Name: BEST, CATHY
Address: PO BOX 3551
City-St-Zip: NORTH FORT MYERS, FL 33917 US

Title: TREA
Name: RAICOVICH, DAWN
Address: PO BOX 3551
City-St-Zip: NORTH FORT MYERS, FL 33917 US

I hereby 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 all other like empowered.

SIGNATURE: BILL LEMMERMAN

PRES

09/09/2010

Electronic Signature of Signing Officer or Director

Date