

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2005 8:00 am
Secretary of State

03-10-2005 90147 010 ****70.00

DOCUMENT # N97000007037	
1. Entity Name CRESTVIEW LITTLE LEAGUE, INC.	

Principal Place of Business PO BOX 1452 CRESTVIEW, FL 32539 US	Mailing Address PO BOX 1452 CRESTVIEW, FL 32539 US
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2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country



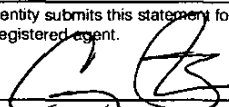
01252005 Chg-NP CR2E037 (10/03)

4. FEI Number 59-3481512	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
BRENER, CORY 36 LAKE ROSEMARY CT. DEFUNIAK SPRINGS, FL 32433		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

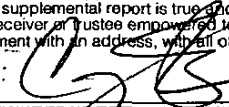
SIGNATURE  DATE **1-26-05**

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BREWER, CORY 36 LAKE ROSEMARY CT. DEFUNIAK SPRINGS, FL 32433 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BLAIR, MIKE 4767 CORNADO CIR. CRESTVIEW, FL 32539 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Brian Goodwin 5340 Hwy 393 Crestview, FL 32539 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PA LYNCH, KIMBERLY 137 STEEPLE CHASE CRESTVIEW, FL 32539 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BLAIRE, BECKY 4767 CORNADO CIR CRESTVIEW, FL 32539 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD LISA JACKSON 110 LIVE OAK CT Crestview, FL 32539 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. 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 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:  DATE **1/26/05** 850 423-1011

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR