


**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 24, 2003 8:00 am
Secretary of State

01-24-2003 90130 045 ****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**

10010556



2. Principal Place of Business
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

CHECK HERE IF MAKING CHANGES

City & State

4. FEI Number **59-3481512** Applied For
Not Applicable

City & State

Zip Country Zip Country

5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CRAWFORD, JEFFREY A
425 WHIRLWAY CT
CRESTVIEW FL 32539**

Name **John C Lynch**
Street Address (P.O. Box Number is Not Acceptable)
137 Steeplechase Drive
City **Crestview** FL Zip Code **32539**

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 *John C Lynch*, **John C. Lynch, President** **8 Jan 03**
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	CRAWFORD, JEFFREY A	
STREET ADDRESS	425 WHIRLWAY CT	
CITY-ST-ZIP	CRESTVIEW FL 32539	
TITLE	VD	<input checked="" type="checkbox"/> Delete
NAME	WILLIS, WILLIAM J	
STREET ADDRESS	5318 WHITNEY CT	
CITY-ST-ZIP	CRESTVIEW FL 32536	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	MIDDLEBROOK, GIA M	
STREET ADDRESS	704 NAUGHTON DRIVE	
CITY-ST-ZIP	CRESTVIEW FL 32536	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	MIDDLEBROOK, GIA M	
STREET ADDRESS	704 NAUGHTON DRIVE	
CITY-ST-ZIP	CRESTVIEW FL 32536	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	LEWELLEN, MATTHEW	
STREET ADDRESS	148 SALVADORE LANE	
CITY-ST-ZIP	CRESTVIEW FL 32539	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	LYNCH, KIMBERLY	
STREET ADDRESS	137 STEEPLCHASE DR	
CITY-ST-ZIP	CRESTVIEW FL 32539	

TITLE	PD President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	John C Lynch	
STREET ADDRESS	137 Steeplechase Drive	
CITY-ST-ZIP	Crestview FL 32539	
TITLE	VP VICE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	MARTIN HLE	
STREET ADDRESS	2985 Windsor Circle	
CITY-ST-ZIP	Crestview FL 32539	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Patricia Campbell	
STREET ADDRESS	126 Springwood Circle	
CITY-ST-ZIP	Crestview FL 32539	
TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Player Agent	
STREET ADDRESS	Cory Brewer	
CITY-ST-ZIP	125 W 35th Ave, Apt 17 Crestview FL 32539	
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Safety Officer	
STREET ADDRESS	William J Willis	
CITY-ST-ZIP	5318 Whitney Ct Crestview FL 32539	
TITLE	TD	<input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Treasurer	
STREET ADDRESS	Kimberly Lynch	
CITY-ST-ZIP	137 Steeplechase Drive Crestview FL 32539	

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 info empowered.

SIGNATURE: *John C Lynch* **John C. Lynch** **8 Jan 03** **689-2923** **(850)**

CR2E037 (10/02)