

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002832

FILED
Feb 21, 2009
Secretary of State

Entity Name: FLORIDA DISTRICT 14 LITTLE LEAGUE BASEBALL, INCORPORATED

Current Principal Place of Business:

5323 SEGARI WAY
WINDERMERE, FL 34786 OR

New Principal Place of Business:

Current Mailing Address:

5323 SEGARI WAY
WINDERMERE, FL 34786 OR

New Mailing Address:

FEI Number: 59-3502784

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DOBBS, DEBBIE
5323 SEGARI WAY
WINDERMERE, FL 34786 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: D () Delete
Name: ROBERTS, RICK
Address: 12633 LAKE RIDGE CIRCLE
City-St-Zip: CLERMONT, FL 34711 LK

Title: TD () Delete
Name: BERLINGER, RAY
Address: 6345 HIDDEN DALE AVE
City-St-Zip: ORLANDO, FL 32819 OR

Title: D () Delete
Name: JOHNSTON, JERRY
Address: 8805 PRETTY LAKE RD.
City-St-Zip: CLERMONT, FL 34711 LK

Title: SE () Delete
Name: GOODWIN, NANCY
Address: 8331 GREEN BAY COURT
City-St-Zip: ORLANDO, FL 32819

Title: SD () Delete
Name: HODGES, LEESA
Address: 10108 LAKESHORE DR.
City-St-Zip: CLERMONT, FL 34711

Title: D () Delete
Name: SMITH, CYNTHIA
Address: 1412 E. RIDGEWOOD ST.
City-St-Zip: ORLANDO, FL 32803

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: RAY BERLINGER

TD

02/21/2009

Electronic Signature of Signing Officer or Director

Date