## FILED May 10, 1999 8:00 am Secretary of State 05-10-1999 90248 009 \*\*\*\*61.25

NONPROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Katherine Harris

ANNUAL REPORT Secretary of State  1999 DIVISION OF CORPORATIONS				03-10-1995	9 90248 009 **** 01.23
DOCUMENT # N9800003507  1. Corporation Name FORT MCCOY LITTLE LEAGUE, INCORPORATED				( IBBIDI BIII 6 5 569994	9- 90020 - 48
Principal Place PO BOX 175 FORT MCCOY		Mailing Address PO BOX 175 FORT MCCOY FL 32134	_		
				E 1981191 E.s. 45.46 (All ESSA) SENT SON	
2. Principal Place of Business 2a. Mailing Address 25				3. Date incorporated or Qualifed 06/15/1998	
Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.			4. FEI Number	Applied For  Not Applicable
City & State City & State				5. Certificate of Status Desired	58.75 Additional Fee Required
Zip	Country 25	Zip 30	Country	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
24 25 29 30 30 9. Name and Address of Current Registered Agent				10. Name and Address of New Regis	stered Agent
OVERLY, SHARON A 12760 NE 244TH TERR			en Chart	Shirtey L. Kiger address (P.O. Box Number is Not Acceptable) HLO NE 147th Ave.	
SALT SPRNIGS FL 32134		84 City Ft	McCoy	FL 85 Zip Code 34	
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11. Pursuant office or r agent, I a	to the provisions of Sections 617.05 registered agent, or both, in the State im familiar with, and accept, the oblig	i02 and 617.1508, Florida Statutes, a of Florida. Such change was auth ations of, Section 617.0503, Florida	the above-named orized by the corpo a Statutes.	corporation submits this statement for the purposition's board of directors. I hereby accept the	e appointment as registered
office of r agent, I a	registered agent, or both, in the State im familiar with, and accept the oblig	ations of, Section 617.0503, Florida	Statutes.	Solution (see the constitution)	2/99 DATE
office of r agent, I a	registered agent, or both, in the State im familiar with, and accept the oblig the state of the	soft of the section 617,0503, Florida  and the section 617,0503, Florida  and the section 617,0503, Florida  (NOTE Re	the above-named corized by the corpo a Statutes.  pistured Agent signature to 13.	Quired when rehealtring) ADDITIONS/CHANGES TO OFFICE	DATE ERS AND DIRECTORS IN 12
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14. 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 annual report or supplemental annual 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 Chepter 617. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

04/13/99 (352)