

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001286

FILED
Feb 06, 2009
Secretary of State

Entity Name: PANTHER BASEBALL CLUB, INC.

Current Principal Place of Business:

13601 N. MILITARY TRAIL
PALM BEACH GARDENS, FL 33410

New Principal Place of Business:

Current Mailing Address:

4360 NORTHLAKE BLVD.
SUITE 211
PALM BEACH GARDENS, FL 33410

New Mailing Address:

FEI Number: 65-0904904 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOROSAK, WILLIAM
4360 NORTHLAKE BLVD
211
PALM BEACH GARDENS, FL 33410 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: T () Delete
Name: BOROSAK, WILLIAM
Address: 132 MICHAEL STREET
City-St-Zip: JUPITER, FL 33458

Title: P () Delete
Name: LAMBERSON, SCOTT
Address: 2433 HOPE LANE EAST
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: S () Delete
Name: CAMPISI, LYNDIA
Address: 4242 HEMLOCK ST
City-St-Zip: PALM BEACH GARDENS, FL 33410

Title: VP () Delete
Name: COSTELLO, LISA
Address: 11854 DUNBAR CT
City-St-Zip: WEST PALM BEACH, FL 33412

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:

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: WILLIAM BOROSAK

T

02/06/2009

Electronic Signature of Signing Officer or Director

Date