

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

**FILED**  
**May 07, 2002 8:00 am**  
**Secretary of State**

05-07-2002 90234 044 \*\*\*\*61.25

DOCUMENT #

1. Entity Name

Florida Baseball, Inc.

N99 000002031

**DO NOT WRITE IN THIS SPACE**

2. Principal Place of Business

2202 WOODLAWN DR

Suite, Apt. #, etc.

3. Mailing Address

2219 TEN OAKS DR

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State

Tallahassee FL

City & State

Tallahassee, FL

Zip

32303

Country

USA

Zip

32312

Country

USA

4. FEI Number

Applied For

☒ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

7. Name and Address of Current Registered Agent

Name

SCOTT HAMILTON

Street Address (P.O. Box Number is Not Acceptable)

2219 TEN OAKS DR

City

Tallahassee

FL

Zip Code

32312

**DO NOT WRITE  
IN THIS SPACE**

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating.)

DATE

**FEE IS \$61.25  
Initial or Amended UBR**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**Make Check Payable to  
Department of State**

10. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP
VICE PRESIDENT	Jon Ausman	2202 Woodlawn Dr.	Tallahassee, FL 32303-3915
PRESIDENT	John Riccardi	2202 Woodlawn Dr	Tallahassee, FL 32303-3915
TREASURER	SCOTT HAMILTON	2202 WOODLAWN DR	Tallahassee, FL 32303-3915

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

CR2E037B (12/01)

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 on an attachment with an address, with all other like empowered.

SIGNATURE: Scott Hamilton - Scott Hamilton

4/29/02

222-9684