

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002304

FILED
Mar 15, 2011
Secretary of State

Entity Name: FLORIDA DISTRICT NO. 17 LITTLE LEAGUE BASEBALL, INCORPORATED

Current Principal Place of Business:

113 S.W. EYERLY AVENUE
PORT ST. LUCIE, FL 349832527 US

New Principal Place of Business:

Current Mailing Address:

113 S.W. EYERLY AVENUE
PORT ST. LUCIE, FL 349832527 US

New Mailing Address:

FEI Number: 65-0892970

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HUDMAN, DEWEY W
113 S.W. EYERLY AVENUE
PORT ST. LUCIE, FL 349832527 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: PD
Name: HUDMAN, DEWEY W
Address: 113 S.W. EYERLY AVENUE
City-St-Zip: PORT ST. LUCIE, FL 349832527 US

Title: D
Name: JOHNSON, CHUCK
Address: 12525 83RD ST
City-St-Zip: FELLSMERE, FL 32948 US

Title: D
Name: MOUGEOTTE, JIM
Address: 2962 SE BELLA RD
City-St-Zip: PORT ST. LUCIE, FL 34984

Title: TD
Name: KUBITSCHKEK, MICHELLE
Address: 6400 FLOYD JOHNSON RD
City-St-Zip: FORT PIERCE, FL 34947

Title: SD
Name: MCNAMARA, LISA
Address: 819 SW JENNIFER TER
City-St-Zip: PORT ST LUCIE, FL 34953

Title: D
Name: BILLINGS, RUSSELL
Address: 1662 SE MISTLETOE ST
City-St-Zip: PORT SAINT LUCIE, FL 34983

I hereby 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 all other like empowered.

SIGNATURE: DEWEY HUDMAN

PD

03/15/2011

Electronic Signature of Signing Officer or Director

Date