

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000002455

FILED
Apr 30, 2009
Secretary of State

Entity Name: FT. BRADEN LITTLE LEAGUE, INC.

Current Principal Place of Business:

4244 WEST TENNESSEE STREET
#239
TALLAHASSEE, FL 32304

New Principal Place of Business:

Current Mailing Address:

19714 CROW LANE
TALLAHASSEE, FL 32310

New Mailing Address:

FEI Number: 59-3565277

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CROW, MARTHA S
19714 CROW LANE
TALLAHASSEE, FL 32310 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: P () Delete
Name: BOZEMAN, MICHELLE
Address: 8447 LAKE ATKINSON DR
City-St-Zip: TALLAHASSEE, FL 32310

Title: V () Delete
Name: BLACKBURN, BARRY
Address: 2903 GATLIN ROAD
City-St-Zip: TALLAHASSEE, FL 32310

Title: S () Delete
Name: HUTTO, TONI
Address: 4388 BLOUNT CREEK ROAD
City-St-Zip: TALLAHASSEE, FL 32310

Title: T () Delete
Name: MILLER, KAREN
Address: 2711 BOW-N-ARROW
City-St-Zip: TALLAHASSEE, FL 32310

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HEVENER, DEBBIE
Address: 2056 OSCAR HARVEY RD
City-St-Zip: TALLAHASSEE, FL 32310

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: MARTHA S. CROW

RA

04/30/2009

Electronic Signature of Signing Officer or Director

Date