

# 2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N99000002977

FILED  
Jan 25, 2007  
Secretary of State

**Entity Name:** FERNANDINA BEACH BABE RUTH LEAGUE, INC.

**Current Principal Place of Business:**

1001 BEECH ST.  
FERNANDINA BEACH, FL 32034

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 722  
FERNANDINA BEACH, FL 32035

**New Mailing Address:**

**FEI Number:** 59-2666099      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

LESTER, ANGELA  
2119 RUSSELL RD  
FERNANDINA BEACH, FL 32034      US

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: ANGIE LESTER

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P      ( ) Delete  
Name: LESTER, ANGIE  
Address: 2119 RUSSELL RD  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: V      ( ) Delete  
Name: MANNING, MARK  
Address: 1342 GERBING RD  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: S      ( ) Delete  
Name: PLIVER, JAMES  
Address: 2974 PARK SQUARE PL  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title: T      (X) Delete  
Name: HAWKINS, JENNER  
Address: 1568 ARBOR LANE  
City-St-Zip: FERNANDINA BEACH, FL 32034

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: S      (X) Change ( ) Addition  
Name: WATERS, TINA  
Address: 2121 EGRET LANE  
City-St-Zip: FERNANDINA BEACH, FL 32034

Title:      ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: ANGIE LESTER

P

01/25/2007

Electronic Signature of Signing Officer or Director

Date