

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004106

FILED
May 01, 2004
Secretary of State

Entity Name: EXPLORER BASEBALL ASSOCIATION, INC.

Current Principal Place of Business:

189 AZALEA POINT DRIVE SOUTH
PONTE VEDRA BEACH, FL 32082

New Principal Place of Business:

Current Mailing Address:

189 AZALEA POINT DRIVE SOUTH
PONTE VEDRA BEACH, FL 32082

New Mailing Address:

FEI Number: 59-3585374

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WESTLING, DALE G SR
331 E UNION STREET
JACKSONVILLE, FL 32202 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 () Delete
Name: RICHETTI, DONALD N
Address: 189 AZALEA PT DR SOUTH
City-St-Zip: PONTE VEDRA BEACH, FL 32082

Title: STD () Delete
Name: WESTLING, DALE G SR
Address: 331 E UNION ST
City-St-Zip: JACKSONVILLE, FL 32202

Title: D () Delete
Name: RICHETTI, CYNTHIA L
Address: 189 AZALEA PT DR SOUTH
City-St-Zip: PONTE VEDRA BEACH, FL 32082

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:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: DONALD N. RICHETTI

PD

05/01/2004

Electronic Signature of Signing Officer or Director

Date