## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 24 1997 8:00am

Secretary of State

(96/6)

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9400056157 (8)

RMB BASEBALL INC.

appears in Block 12 or Block 13 if changed

SIGNATURE AND TYPES OR PI

SIGNATURE:

Mailing Address Principal Piace of Business 502 EAST BRIDGERS AVE. 502 EAST BRIDGERS AVE. AUBURNDALE FL 33823 AUBURNDALE FL 33823-3721 3. Date incorporated or Qualified 3a. Date of Last Report 05/01/1996 07/28/1994 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 59-3264056 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional П Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Zip Country This corporation has liability for intangible tax under s. 199.032, Yes No 24 Florida Statutes 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name BOSTICK, R. MARK 502 E. BRIDGERS AVE. 82 Street Address (P.O. Box Number is Not Acceptable) **AUBURNDALE FL 33823** В3 84 City Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change suthorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DPT \_\_ DELETE 1.1 TITLE Change Addition BILLE BOSTICK, R. MARK 12 NAME NAME 502 EAST BRIDGERS AVE. STREET ADDRESS 1.3 STREET ADDRESS AUBURNDALE FL 1.4 CITY-ST-ZIP CITY - S1 - ZIF DELETE Change Addition TILLE 2.1 TiTLE READY, BILLY R 2.2 NAME 502 E BRIDGERS AVE. STREET ADDRESS 2.3 STREET ADDRESS AUBURNDALE FL 2. 4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS **3.3 STREET ADDRESS** 3 4. CITY-ST-ZIP CITY-\$1-7P DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change ☐ Addition TIME 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP CITY - S1 - ZIP 14. I do 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 annual report or supplemental annual 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 607. Florida Statutes; and that my name