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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

May 18 1998 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

SIGNATURE:

P94000064161 (0)

AMERICAN ASSOCIATION OF PROFESSIONAL BASEBALL PLAYERS, INC.

AYERS,	INC.				
Principal Place	of Business	Mailing Address			Q4011 04001 11040 04401 4401 4001
3700 AIRPORT ROAD SUITE 307 BOCA RATON FL 33431 US		3700 AIRPORT ROAD SUITE 307 BOCA RATON FL 33431 US		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
				08/30/1994	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0563317	Not Applicable
Suite, Apt 1		Suite, Apt. #, etc	D	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	•	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	<b>28</b>	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	<ol> <li>This corporation owes or has paid the Personal Property Tax due June 30.</li> </ol>	Yes XXNo
	9. Name and Address of Curre			10. Name and Address of New Register	
BOO	GEN, MARK D		81 Name		
	O AIRPORT ROAD		B2 Street Add	Iress (P.O. Box Number is Not Acceptable)	
SUITE 307			51 Street Add	ress (F.O. Box Number is Not Acceptable)	
	CA RATON FL 33431		63		
			84 City		- 85 Zip Code
			GH City	F	EL 85 Zip Code
11. Pursuant t	o the provisions of Sections 607.05	02 and 607.1508, Florida	Statutes, the above-named corpora	poration submits this statement for the purpos ation's board of directors. I hereby accept the	e of changing its registered
agent. 1 ar	n familiar with, and accept the oblig	gations of, Section 607.050	05, Florida Statutes.	more board of directors. Thereby accept the	appointment as registered
SIGNATURE .					
	Signature, typed or printed name of registered ag	pent and title if applicable. ND DIRECTORS	(NOTE: Registered Agent signature requ		
TITLE	VP OFFICIAS A	DELET	13. E 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME	BOGEN, MARK	L D(100)	1.2 NAME		E Grange E Madreton
STREET ADDRESS	3700 AIRPORT RD, #307		1.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY - ST - ZIP		
TITLE	P	DELET		<del></del>	Change Addition
NAME	STENNETT		2.2 NAME		
STREET ADDRESS	3700 AIRPORT RD, #307		2.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		2 4 CITY-ST-ZIP		
TITLE	VP	DELET.	E 3.1 TITLE		Change Addition
NAME	RILEY, KATHLEEN		3.2 NAME		
STREET ADDRESS	3700 AIRPORT RD, #307		3.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		3.4 CITY-\$1-ZIP		
TITLE		L_] DELET			Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		·
CITY-ST-ZIP TITLE		DELET	4 4 City-St-ZIP E 5.1 TITLE		Change Addition
NAME			5.2 NAME		C cusude C vocation
STREET ADDRESS			5.3 STREET ADDRESS		ŀ
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELET			Change Addition
NAME		- <del>-</del>	6.2 NAME		<del>- •</del> ······
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14. I hereby coindicated	on this annual report or supplement	ial annual report is true an	alify for the exemption stated in d accurate and that my signatu	Section 119.07(3)(i), Florida Statutes. I furtheure shall have the same legal effect as if made	under oath; that I am an
officer or of Block 12 c	director of the corporation or the rec or Block 13 if changed, or on an atta	ceiver or trustee empowers achment with an address.	ed to execute this report as req	quired by Chapter 607, Florida Statutes; and th	at my name appears in

4/30/98

561-447-4100