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Jul 08 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1997**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000041772

1. Corporation Name
Florida Baseball & Softball Academy, Inc.

Principal Place of Business
1270 Belle Avenue
Suite 103
Winter Springs, FL 32708

Mailing Address

3. Date Incorporated or Qualified: 5/15/96
3a. Date of Last Report: N/A
4. FEI Number: 59-3186281 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

2. Principal Place of Business
21 1270 Belle Avenue, Ste 103
Suite, Apt. #, etc.
22

2a. Mailing Address
26 Same
Suite, Apt. #, etc.
27

[redacted]

23 Winter Springs, FL
28
Zip / Country
24 32708 25 Seminole
29
Zip / Country
30

Trust Fund Contribution ☐ Added to Fees
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CSC Network
1201 Hays Street
Tallahassee, FL 32301

10. Name and Address of New Registered Agent

81 Name: DENISE DEVOE-HAZELETT
82 Street Address (P.O. Box Number is Not Acceptable): 1270 BELLE AVE.
83
84 City: WINTER SPRINGS FL 85 Zip Code: 32708

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 was authorized 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] (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) Denise DeVoe-Hazelett 5/6/97 DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT / DIRECTOR ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	Terry Hazelett	1.2 NAME	
STREET ADDRESS	1260 Belle Avenue, Suite 103	1.3 STREET ADDRESS	
CITY-ST-ZIP	Winter Springs, FL 32708	1.4 CITY-ST-ZIP	
TITLE	V. PRESIDENT / DIRECTOR ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	Denise DeVoe Secretary / Treasurer	2.2 NAME	
STREET ADDRESS	1260 Belle Avenue, Suite 103	2.3 STREET ADDRESS	
CITY-ST-ZIP	Winter Springs, FL 32708	2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	PC
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	7.8
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	500002233625
STREET ADDRESS		6.3 STREET ADDRESS	-07/09/97--01042--021
CITY-ST-ZIP		6.4 CITY-ST-ZIP	***550.00

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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Terry Hazelett PRESIDENT 5/5/97 696-2255
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (9/96)