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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Apr 29 1997 8:00am Secretary of State

DOCUMENT #	P96000044326	(2)

•	MEN # <b>P9600C</b> VALES DIXIE BASEBALL, INC						1 <b>1011 (11010</b> 11010 11 <b>0</b> 11	
Principal Plac	e of Business	Mailing Address				- I IQLITALI AL TEKO QTKIN OSTIN BUNIN QQILI QQILI Q	JAN DANG URIN UNIO	
33 N. LAKESHORE BLVD.		PO BOX 431	•					
						3. Date Incorporated or Qualified 3a. 05/20/1996	. Date of Last Ri	eport
2. Principa' Place of Business 2		2a. Mailing Address	2a. Mailing Address			4. FEI Number	F-4-	optied For
21 Suite, Apt. #, etc		26	26 Suite Apt # etc			59-3378447	\$8.75 /	ot Applicable
— ¬ ' ' ' ' -		27	<del></del>			5. Certificate of Status Desired	Fee Re	
City & Stat	e	City & State		***************************************		6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added t	
Zip	Country	Zip	Coun	try		8. This corporation has liability for intang		. 199.032,
24	25 29 30 9. Name and Address of Current Registered Agent		30	Florida Statutes Yes No  10. Name and Address of New Registered Agent				
DRA	SDO, WILLIAM A	it negistered Agent		1 Name		IU. Name and Address of New Adjuster	ed Miletin	
	N. LAKESHORE BLVD.		) 	2 Street	Addro	ss (P.O. Box Number is Not Acceptable)		
	E WALES FL 33853			82 Street Addr		as (F.O. Box Number is Not Acceptable)		
				3				
			ŀ	4 City			85 Zip (	Code
11. Pursuant office or a agent. La	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblig	02 and 607.1508, Florida Statute of Florida. Such change was a lations of, Section 607.0505, Flo	es, the about outhorized orida Statu	ove-named by the cor les.	i corpo poratio	oration submits this statement for the purposon's board of directors. I hereby accept the	e of changing it appointment as	s registered registered
SIGNATURE								
12.	Signature: typed or printed name of registered ag OFFICERS AN	ent and tipe if applicable (NOTI	Registered .	igent signature	a required	d when reinstating) DAT ADDITIONS/CHANGES TO OFFICERS		3S IN 12
HILE	DELETE			11 TITLE		VSTD	Change	Addition
NAME			1.2 NAN	E	W	illian A. Drasdo 3 N. Lekeshore Blvd ake Wales, FL 33853		
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CITY-ST-7IP			•	-ST-ZIP	1			{

14. I do hereby certily that the information supplied with this filing does not quality 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.

ORDINECTOR A. Drasdo, 4-22-97, (94) 676-5903