

**2003 NOT-FOR-PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Jan 27, 2003 8:00 am
Secretary of State

01-27-2003 90156 025 ****61.25

DOCUMENT # 702272

1. Entity Name

NORTH LAKE LAND AMERICAN LITTLE LEAGUE, INC.



Principal Place of Business

**HUNT FOUNTAIN PARK
7044 GREEN ROAD
LAKE LAND FL 33809-
US**

Mailing Address

**HUNT FOUNTAIN PARK
7044 GREEN ROAD
LAKE LAND FL 33809-
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number **59-3178211**

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

CHECK HERE IF MAKING CHANGES



6. Name and Address of Current Registered Agent

**CARLTON, CHARLES L
2310 LAKE LANE HILLS BLVD
LAKE LAND FL 33805**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	SEARLES, BILLY	
STREET ADDRESS	1110 ENTERPRISE ST	
CITY-ST-ZIP	LAKE LAND FL 33805	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	BRAWNLOW, ANGELA	
STREET ADDRESS	201 GRANITE DR	
CITY-ST-ZIP	LAKE LAND FL 33809	
TITLE	T	<input type="checkbox"/> Delete
NAME	SHIVER, DEBORAH	
STREET ADDRESS	2050 RANGLAND AVE	
CITY-ST-ZIP	LAKE LAND FL 33809	
TITLE	ST	<input checked="" type="checkbox"/> Delete
NAME	ASHER, STEPHANIE	
STREET ADDRESS	7947 BENJAMIN DR	
CITY-ST-ZIP	LAKE LAND FL 33810	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	VPD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	ST	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Sandy Roddenberry	
STREET ADDRESS	1015 Brentwood Ln	
CITY-ST-ZIP	Lake Land FL 33809	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I 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 report or supplemental 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]

1/22/03

863-858-8181

CR2E037 (10/02)