I hereby certify that the information indicated on this report or supplemental report is true and accc oath; that I am an officer or director of the corporation or the receiver or trustee empowered to exe above, or on an attachment with all other like empowered.		
SIGNATURE: PATRICIA RIZZO	TREASURER	09/21/2016

### SIGNATURE: PATRICIA RIZZO

Electronic Signature of Signing Officer/Director Detail

EUSTIS, FL 327	726 US			
The above named	entity submits this statement for the purpose of changing	its registered office or regis	tered agent, or both, in the State of	Florida.
SIGNATURE: PATRICIA RIZZO				09/21/2016
	Electronic Signature of Registered Agent			Date
Officer/Direc	tor Detail :			
Title	PRESIDENT	Title	VP	
Name	HIMES, JERRY	Name	JACKSON, ALAN	
Address	PO BOX 1100	Address	PO BOX 1100	
City-State-Zip:	EUSTIS FL 32727	City-State-Zip:	EUSTIS FL 32727	

Title

Name

Address

TREASURER

PO BOX 1100

City-State-Zip: EUSTIS FL 32727

**RIZZO, PATRICIA** 

### RIZZO, PATRICIA 450 GOLF LINKS RD

SECRETARY

City-State-Zip: EUSTIS FL 32727

BARKER, KIMBERLY PO BOX 1100

Name and Address of Current Registered Agent:

Title

Name

Address

FEI Number: 59-2114379

Entity Name: EUSTIS LITTLE LEAGUE, INC.

**Current Principal Place of Business:** 

450 GOLFLINKS ROAD EUSTIS, FL 32726

## **Current Mailing Address:**

PO BOX 1100 EUSTIS, FL 32727

### 2016 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL **REPORT**

**DOCUMENT# 757493** 

# FILED Sep 21, 2016 Secretary of State CC5179332729

Certificate of Status Desired: No

Date