

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N21000013603

**Entity Name:** FL ADULT BASEBALL INC

**Current Principal Place of Business:**

2914 GREENLEAF TER  
PARRISH, FL 34219

**Current Mailing Address:**

PO BOX 238  
PARRISH, FL 34219

**FEI Number:** 87-3605903

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

KATYNSKI, ROMAN A  
2914 GREENLEAF TER  
PARRISH, FL 34219 US

*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.*

**SIGNATURE:** \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title P  
Name KATYNSKI, ROMAN A  
Address 2914 GREENLEAF TER  
City-State-Zip: PARRISH FL 34219

Title VP  
Name TREMBLAY, TIMOTHY S  
Address 7736 GRANDE SHORES DR  
City-State-Zip: LAKEWOOD RANCH FL 34240

Title D  
Name WEEDO, AARON  
Address 2914 112TH TER E  
City-State-Zip: PARRISH FL 34219

Title D  
Name CACCIATORE, ANTHONY  
Address 13220 SWIFTWATER WAY  
City-State-Zip: LAKEWOOD RANCH FL 34211

Title D  
Name GAGNON, MATTHEW T SR  
Address 4357 KINGSFIELD DR  
City-State-Zip: PARRISH FL 34219

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** TIMOTHY TREMBLAY

VP

03/16/2023

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date