

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P23202

FILED
Jan 08, 2010
Secretary of State

Entity Name: MAJOR LEAGUE BASEBALL PLAYERS ALUMNI ASSOCIATION, INC.

Current Principal Place of Business:

1631 MESA DRIVE, SUITE B
COLORADO SPRINGS, CO 80906 US

New Principal Place of Business:

Current Mailing Address:

5027 BACKLICK RD.
ANNANDALE, VA 22003 US

New Mailing Address:

FEI Number: 52-1276284

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BLANTON, EDWIN F
810 THOMASVILLE ROAD
TALLAHASSEE, FL 32303 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: P
Name: ROBINSON, BROOKS
Address: 11320 JOHN CARROLL ROAD
City-St-Zip: OWENINGS MILLS, MD 21117

Title: C
Name: HANNAN, JIM
Address: 1775 'I' STREET, N.W., SUITE 200
City-St-Zip: WASHINGTON, DC 20006

Title: STVC
Name: VALENTINE, FRED
Address: 4838 BLAGDEN AVE., NW
City-St-Zip: WASHINGTON, DC 20011

Title: D
Name: SANDY, ALDERSON
Address: POST OFFICE BOX 122000
City-St-Zip: SAN DIEGO, CA 92112

Title: D
Name: HAND, RICH
Address: 9404 BELLECHASE
City-St-Zip: GRANDBURY, TX 76049

Title: AS
Name: MOORE, SAMUEL N
Address: 5027 BACKLICK ROAD
City-St-Zip: ANNANDALE, VA 22003

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: SAMUEL N. MOORE

AS

01/08/2010

Electronic Signature of Signing Officer or Director

Date