2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N00000006674

Entity Name: KEY WEST SOCCER CLUB, INC.

FILED Oct 27, 2004 Secretary of State

Current Principal Place of Business:		New Principal Place of Business:	
3708 PEARLMAN CT KEY WEST, FL 33040			
Current Mailing Address:		New Mailing Address:	
3708 PEARLMAN CT KEY WEST, FL 33040			
FEI Number: 65-0847842 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent:			
MEYER, JEFFREY B ESQ 31211 AVE A BIG PINE KEY, FL 33043 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
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Delete SANCHEZ, KAREN 3708 PEARLMAN CT KEY WEST, FL 33040	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	VD () Delete MEYER, JEFFREY 31211 AVE A BIG PINE KEY, FL 33043	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	TD () Delete WHEELER, KITTY 1523 4TH ST KEY WEST, FL	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	SD () Delete ALFONSO, GINA 2438 PATTERSON AVENUE KEYWEST, FL	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete PHELPS, LORRAINE 32 KEY HAVEN RD KEY WEST, FL	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	D () Delete GONZALEZ, KATHY B 29252 COCONUT PALM ST BIG PINE KEY, FL	Title: Name: Address: City-St-Zip:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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 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 an address, with all other like empowered.

SIGNATURE: KITTY F. WHEELER TD 10/27/2004