

2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N00000006674

FILED
Oct 20, 2006
Secretary of State

Entity Name: KEY WEST SOCCER CLUB, INC.

Current Principal Place of Business:

1523 FOURTH STREET
KEY WEST, FL 33040

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 6513
KEY WEST, FL 33041

New Mailing Address:

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: JEFFREY B. MEYER, ESQ.

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WHEELER, KITTY F
Address: 1523 FOURTH ST
City-St-Zip: KEY WEST, FL 33040

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VD () Delete
Name: MEYER, JEFFREY
Address: 31211 AVE A
City-St-Zip: BIG PINE KEY, FL 33043

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: TD () Delete
Name: WHEELER, KITTY
Address: 1523 4TH ST
City-St-Zip: KEY WEST, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD () Delete
Name: ALFONSO, GINA
Address: 2438 PATTERSON AVENUE
City-St-Zip: KEYWEST, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: PHELPS, LORRAINE
Address: 32 KEY HAVEN RD
City-St-Zip: KEY WEST, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D () Delete
Name: GONZALEZ, KATHY B
Address: 29252 COCONUT PALM ST
City-St-Zip: BIG PINE KEY, FL

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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

PD

10/20/2006

Electronic Signature of Signing Officer or Director

Date