2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006384

FILED Jul 11, 2008 Secretary of State

Entity Name: GREATER FORT MYERS SOCCER CLUB, INC. **Current Principal Place of Business: New Principal Place of Business:** 7340 CONCOURSE DRIVE FORT MYERS, FL 33908 US **Current Mailing Address: New Mailing Address:** P.O. BOX 07225 FORT MYERS, FL 33919 US FEI Number: 59-2468117 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) 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: STEWART, CRYSTAL MULLINS, TOM 17510 STERLING LAKE DRIVE 7396 WILLEMS DR FT MYERS, FL 33908 US FT MYERS, FL 33912 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: TOM MULLINS 07/11/2008 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete MULLINS, TOM Name: Name: P.O. BOX 07225 Address: Address: City-St-Zip: FORT MYERS, FL 33919 US City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: STEWART, CHRYSTAL Name: MULLINS, TOM Address: 17510 STERLING LAKE DRIVE Address: 7396 WILLEMS DR City-St-Zip: FORT MYERS, FL 33919 US City-St-Zip: FORT MYERS, FL 33908 US Title: () Delete Title: () Change () Addition SCINE, ANTHONY Name: Name: P.O. BOX 07225 Address: Address: City-St-Zip: FORT MYERS, FL 33919 US City-St-Zip: Title: () Delete Title: (X) Change () Addition П Name: TODD, CHARLIE Name: SARNAC, STEWART 4037 DEL PRADO BLVD P.O. BOX 07225 Address: Address: City-St-Zip: CAPE CORAL, FL 33904 US City-St-Zip: FT MYERS, FL 33919 US

I hereby certify that the information supplied with this filing does not qualify 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: TOM MULLINS TP 07/11/2008