

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000011758

FILED
Apr 15, 2007
Secretary of State

Entity Name: TAMPA UNITED SOCCER, INC.

Current Principal Place of Business:

1705 SURREY TRAIL
WIMAUMA, FL 33598

New Principal Place of Business:

Current Mailing Address:

1705 SURREY TRAIL
WIMAUMA, FL 33598

New Mailing Address:

FEI Number: 20-5874349 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DRAPPO, PAUL A
5301 WATSON ROAD
RIVERVIEW, FL 33569 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 () Delete
Name: HARPER, JAMES M SR.
Address: 1705 SURREY TRAIL
City-St-Zip: WIMAUMA, FL 33598

Title: VP () Delete
Name: LAWRENCE, JAY
Address: 18140 REGENTS SQUARE DRIVE
City-St-Zip: TAMPA, FL 33647

Title: SEC () Delete
Name: MACDONALD, PAULA L
Address: 1705 SURREY TRAIL
City-St-Zip: WIMAUMA, FL 33598

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: PAULA L. MACDONALD

SEC

04/15/2007

Electronic Signature of Signing Officer or Director

_____ Date