

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N16041

FILED
Apr 20, 2007
Secretary of State

Entity Name: SAN CARLOS PARK SCORPION SOCCER CLUB, INC.

Current Principal Place of Business:

18251 THREE OAKS PARKWAY
FORT MYERS, FL 33912 US

New Principal Place of Business:

18251 THREE OAKS PARKWAY
FORT MYERS, FL 33967 US

Current Mailing Address:

P.O. BOX 894
ESTERO, FL 33928

New Mailing Address:

FEI Number: 59-2656076 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIENHARDT, JAMIE
9998 ROOKERY CIRCLE
ESTERO, FL 33928 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: TD () Delete
Name: FITZGERALD, AMY
Address: 19068 MURCOTT DR E
City-St-Zip: FORT MYERS, FL 33912

Title: TD () Delete
Name: FITZGERALD, AMY
Address: 19068 MURCOTT DR E
City-St-Zip: FORT MYERS, FL 33912

Title: PD () Delete
Name: LIENHARDT, JAMIE
Address: 9998 ROOKERY CIRCLE
City-St-Zip: ESTERO, FL 33928

Title: VD () Delete
Name: CHERRY, BETH
Address: 108 BAY MAR DRIVE
City-St-Zip: FORT MYERS BEACH, FL 33931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: FITZGERALD, AMY
Address: 19068 MURCOTT DR E
City-St-Zip: FORT MYERS, FL 33967

Title: TD (X) Change () Addition
Name: FITZGERALD, AMY
Address: 19068 MURCOTT DR E
City-St-Zip: FORT MYERS, FL 33967

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: JAMIE M. LIENHARDT

Electronic Signature of Signing Officer or Director

MS.

04/20/2007

Date