


**FILED**  
**Jul 14, 1999 8:00 am**  
**Secretary of State**

07-14-1999 90003 024 \*\*\*\*61.25

**CORPORATION ANNUAL REPORT 1999**



**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

**DOCUMENT # N36605 (b)**  
 1. Corporation Name

**UNITED Soccer Association of Tampa Bay, Inc.**

Principal Place of Business: **60 NICK POLLANO, 320 W. BEARSS AVE, TAMPA, FL. 33613**  
 Mailing Address: **C/O NICK POLLANO, 320 W. BEARSS AVE, TAMPA, FL. 33613**

605145-90001-72



21. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
22. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	02/14/1990
23. City & State	27. City & State	4. FEI Number
24. Zip	28. Zip	59-3036720
25. Country	29. Country	Applied For
	30. Country	Not Applicable
9. Name and Address of Current Registered Agent		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees

81. Name	82. Street Address (P.O. Box Number is Not Acceptable)	83.	84. City	85. Zip Code
NICK POLLANO	320 W. BEARSS AVE		TAMPA	FL 33613

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: *Nick Pollano* **NICK POLLANO** - President DATE: 7/17/99

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NICK POLLANO	1.2 NAME	
STREET ADDRESS	320 W BEARSS AVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33613	1.4 CITY-ST-ZIP	
TITLE	VP D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BODIE PISSOTT	2.2 NAME	
STREET ADDRESS	13811 HANNER AVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33613	2.4 CITY-ST-ZIP	
TITLE	VP D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MICHAEL DAVID	3.2 NAME	
STREET ADDRESS	2912 TIKIWOOD CT	3.3 STREET ADDRESS	
CITY-ST-ZIP	RIVERVIEW FL 33569	3.4 CITY-ST-ZIP	
TITLE	TREA. D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BERNIE SKERKOWSKI	4.2 NAME	
STREET ADDRESS	13014 N. DAVID MORAY HWY #266	4.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33618	4.4 CITY-ST-ZIP	
TITLE	J.P. D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	STEVE MITCHELL	5.2 NAME	
STREET ADDRESS	4916 ROCKLEDGE CIRCLE	5.3 STREET ADDRESS	
CITY-ST-ZIP	TAMPA FL 33624	5.4 CITY-ST-ZIP	
TITLE	SEC. D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RICK COLON	6.2 NAME	
STREET ADDRESS	12327 FILMORE STREET	6.3 STREET ADDRESS	
CITY-ST-ZIP	SHARONHILL FL.	6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Rick Colon* **RICK COLON** - Treasurer DATE: 7/8/99 (813) 962-0196

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #