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Mar 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N40483** (2)

1. Corporation Name

COCONUT CREEK SOCCER CLUB, INC.

Principal Place of Business

Mailing Address

**800 NW 43 AVE
COCONUT CREEK FL 33066-1535**

**800 NW 43 AVE
COCONUT CREEK FL 33066-1535**

3. Date Incorporated or Qualified

10/24/1990

4. FEI Number

59-2831466

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ANDERSON, DAVE
900 NW 43 AVE
COCONUT CREEK FL 33063**

81 Name

DAN HOBBY

82 Street Address (P.O. Box Number is Not Acceptable)

4230 N.W. 9TH COURT

83

84 City

COCONUT CREEK

FL

85 Zip Code

33066

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

3/8/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☒ DELETE
NAME **ANDERSON, DAVE**
STREET ADDRESS **941 NW 45 AVE**
CITY-ST-ZIP **COCONUT CREEK FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE **EVD** ☐ DELETE
NAME **HOBBY, DAN**
STREET ADDRESS **4230 N.W. 9TH COURT**
CITY-ST-ZIP **COCONUT CREEK FL**

2.1 TITLE **PD** ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE **T** ☐ DELETE
NAME **CATANIA, JUDY**
STREET ADDRESS **291 NW 43 AVENUE**
CITY-ST-ZIP **COCONUT CREEK FL**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE **EVD** ☐ DELETE
NAME **JOHN NELSON**
STREET ADDRESS **6720 N.W. 24TH TERRACE**
CITY-ST-ZIP **FT LAUDERDALE, FL 33309**

4.1 TITLE **EVD** ☐ Change ☒ Addition
4.2 NAME **JOHN NELSON**
4.3 STREET ADDRESS **6720 N.W. 24TH TERRACE**
4.4 CITY-ST-ZIP **FT LAUDERDALE FL 33309**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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.

SIGNATURE:

Judy Catania **2/7/98** **(954) 979-5233**

CR2E037 (10/97)