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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

FILED

JAN 28 AM 9:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N43654 (5)

1. Corporation Name

PALM BEACH SOCCER LEAGUE, INC.

Principal Place of Business

Mailing Address

% ARNOLD E. THOMPSON
1307 N.W. 8TH COURT
BOYNTON BEACH FL 33426

% ARNOLD E. THOMPSON
1307 N.W. 8TH COURT
BOYNTON BEACH FL 33426

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/31/1991

3a. Date of Last Report

02/16/1994

4. FEI Number

65-0325764

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

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing

\$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3)

\$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

THOMPSON, ARNOLD E.
1307 N.W. 8TH COURT
BOYNTON BEACH FL 33426

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE -VD-
NAME -SCHOFIELD, RICHARD
STREET ADDRESS -126 SPARROW DR #4B-
CITY-ST-ZIP -ROYAL PALM BCH FL

1.1 TITLE P/D
1.2 NAME HENRY, ROBERT
1.3 STREET ADDRESS 13372 KINGSBURY DR
1.4 CITY-ST-ZIP WELLINGTON, FL 33414

TITLE -TD-
NAME PAUL, GELB
STREET ADDRESS 4604 SQ LAKE DR
CITY-ST-ZIP W PALM BCH FL

2.1 TITLE V/D
2.2 NAME PAUL GELB
2.3 STREET ADDRESS 4604 SQ LAKE DR
2.4 CITY-ST-ZIP W. PALM BEACH, FL 33410

TITLE -SD-
NAME THOMPSON, ARNOLD
STREET ADDRESS 1307 N.W. 8 COURT
CITY-ST-ZIP BOYNTON BEACH FL

3.1 TITLE S/T/D
3.2 NAME THOMPSON, ARNOLD
3.3 STREET ADDRESS 1307 N.W. 8TH CT.
3.4 CITY-ST-ZIP BOYNTON BEACH, FL 33412

TITLE -PD-
NAME BENGTSON, ANDERS
STREET ADDRESS -1803 13 LANE
CITY-ST-ZIP GREENACRES FL

4.1 TITLE V/D
4.2 NAME BENGTSON, ANDERS
4.3 STREET ADDRESS 1801 So. FLAGLER DR.
4.4 CITY-ST-ZIP W. PALM BEACH FL 33401

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(2)(b), 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:

Arnold E. Thompson / ARNOLD E. Thompson 1/16/95-737-4076 (407)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Number