FILE NOW: FILING FEE IS \$61.25 NONPROFIT **CORPORATION** ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

N46995

GREATER-MELBOURNE-SOCGER-ASSOCIATION, INC.

MELBOURNE EAU GALLIE UNITED SOCCER CLUB, INC.

1276 COVENTR'	Y CHOLE
MELBOURNE FL	32904

Principal Place of Business

Mailing Address

PO BOX 2341 MELBOURNE FL 32902-2341

FILED May 14 1997 8:00am Secretary of State

THE PROPERTY OF THE PARTY OF TH	
Action	

110		US							
US		US				3. Date incorporated or Qualified 01/22/1992		te of Last R 05/01/19	
	Place of Business	2a. Mailing Address	3			4. FEI Number		Ap	oplied For
H		26				59-3103275			eldabilqqA to
Suite, Apt.	#, etc.	Suite, Apt. #, et	c.		<u>.</u>	5. Certificate of Status Desired			Additional equired
City & Stat	le	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Zip	Country 25	Zip 29	30 Co	untry		This corporation has liability for in Florida Statutes	ntangible i	_	199.032,
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of New Re	gletered A	gent	
				81	Name				
MCCLE	LLAND, CLIFTON A. JR.			82	Street Ad	Idress (P.O. Box Number is Not Acceptab	la)		
	UTH BABCOCK STREET			"	DIDDI NO	idiosa (r.o. pox Hombal la Hot Acceptac	,		
SUITE 4				83					
	URNE FL 32901			84	City			les l Zio	Code
				**	City		FL	85 Zip (COOR
11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508, Florida	Statules, the a	above	named co	progration submits this statement for the p	urpose of	changing it	ts registered
office or r	registered agent, or both, in the State am familiar with, and accept the oblic	e of Florida. Such change galions of, Section 617.05	was authorize 03. Florida Sta	ed by stutes.	the corpor	propriation submits this statement for the plation's board of directors. I hereby accept	ot the appo	intment as	registered
SIGNATURE	, , , , , , , , , , , , , , , , , , , ,	,	,						
SIGNATORE .	Signature typed or printed name of registered ag	ent and little if applicable.	(NOTE: Registere	ed Ager	t elgnature rec	cuired when reinstalling)	DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND		
TITLE	DP	X DELE	TE 1.11	TITLE		DP		Change	X Addition
NAME	MARKHAM, FRED			NAME	l	KITCHEN, BRUCE			
STREET ADDRESS	1276 COVENTRY CIRCLE		1.3 \$	STREET	ADORESS	116 ORCHID BLVD MELBOURNE, FL 32901			
CITY-ST-ZIP	MELBOURNE FL	TV pci c		CITY-SI				70	0 1466-
TITLE	DV	₹ DELE		TITLE		DV move		Change	X Addition
NAME	CRUGER, RON			NAME		HAYES, TOM			
STREET ADDRESS	1343 NW JUPITER				ADDRESS	2574 KINGSMILL AVENUE MELBOURNE, FL 32934			
DITY-ST-ZIF	PALM BAY FL DV	XX DELE		CITY-S		DV		Change	X Addition
		IN DELE			ı			Onlarige	EEI MUUITUIT
NAME	RUNKEL, CLIF 812 SADNET CIRCLE		1	NAME	ADDRESS	MARKHAM, FRED 1276 COVENTRY CIRCLE			
STREET ADDRESS	PALM BAY FL					MELBOURNE, FL 32904			
CITY-ST-ZIP	DT DT	X DELE		CITY-S'		DT		Change	X Addition
NAME	STULTZ, J STEPHEN	LEE OLLC		NAME		WAVERING, GLORIA			
STREET ADDRESS	617 MARK DR				UDRESS	871 REMSEN AVENUE NW			
CITY-ST-ZIP	W MELBOURNE PL			DITY-ST		PALM BAY, FL 32907			
TITLE	DS	X DELE		IIILE		DS DATE TO 32307		Change	X Addition
		****		VAME		LONG, JIM		-	
NAME	WHEI PLEY, CHRIS				nonrec	1651 RUSTIC WAY			
	WHELPLEY, CHRIS		535	STREET	พบพเธออา	1031 MODITO HAI			
STREET ADDRESS	617 MARK DR			STREET : City - St					
	617 MARK DR W MELBOURNE FL	X DELE	5.4 (STREET I City- s t Title		MELBOURNE, FL 32935		Change	X Addition
STREET ADDRESS CITY-ST-ZIP TITLE	617 MARK DR W MELBOURNE FL D	XX DELE	5.4 (TE 6.1 T	CITY-ST TITLE		MELBOURNE, FL 32935		Change	X Addition
STREET ADDRESS CITY-ST-ZIP TITLE NAME	617 MARK DR W MELBOURNE FL D ZITO, RALPH	XX DELE	5.4 (TE 6.1 1 6.2 P	CITY-ST TITLE NAME	ZIP D	MELBOURNE, FL 32935 CRUGER, RON		Change	X) Addition
STREET ADDRESS CITY-ST-ZIP TITLE	617 MARK DR W MELBOURNE FL D	XX DELE	5.4 0 TE 6.1 1 6.2 P 6.3 S	CITY-ST TITLE NAME	-ZIP ADORESS	MELBOURNE, FL 32935		Change	Addition

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 chapted, or on an attachment with an address.

SIGNATURE:

(407) 725-5678