

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000005084

FILED
Mar 17, 2005
Secretary of State

Entity Name: PORT ST. JOE YOUTH SOCCER, INC.

Current Principal Place of Business:

419 BALTZELL AVE
PORT ST JOE, FL 32456

New Principal Place of Business:

Current Mailing Address:

419 BALTZELL AVE
PORT ST JOE, FL 32456

New Mailing Address:

FEI Number: 59-3491537

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELLMER, R MARK
2106 CYPRESS AVE
PORT ST JOE, FL 32456 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: PDC () Delete
Name: CURRY, ELIZABETH F
Address: 419 BALTZELL AVE
City-St-Zip: PT ST JOE, FL

Title: STD () Delete
Name: ELLMER, R MARK
Address: 2106 CYPRESS AVE
City-St-Zip: PT ST JOE, FL 32456

Title: VD () Delete
Name: LACOUR, MICHAEL D
Address: 103 PERIWINKLE DR
City-St-Zip: PT ST JOE, FL 32456

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 Section 119.07(3)(i), 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: R. MARK ELLMER

STD

03/17/2005

Electronic Signature of Signing Officer or Director

Date