2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000000249

Entity Name: LAKE COUNTY SOCCER CLUB, INC.

FILED Apr 05, 2015 **Secretary of State** CC3990261061

Current Principal Place of Business:

27343 STATE RD. 19 TAVARES, FL 32778

Current Mailing Address:

27343 STATE RD. 19 TAVARES. FL 32778

FEI Number: 77-0710758 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

KHOURI, NAJI S 27343 STATE RD. 19 TAVARES, FL 32778 US

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

Officer/Director Detail:

Title	VTD	Title	SD
Name	KHOURI, NAJI S	Name	GRANT, RACHEL R
A -1 -1	07040 OTATE DD 40	A -1-1	07040 07475 DD 40

Address 27343 STATE RD. 19 Address 27343 STATE RD. 19 City-State-Zip: TAVARES FL 32778 City-State-Zip: TAVARES FL 32778

Title D Title D

Name SMITH, MATTHEW VERKAIK, DARYL J Name Address 27343 STATE RD. 19 Address 27343 STATE RD. 19 TAVARES FL 32778 City-State-Zip: City-State-Zip: TAVARES FL 32778

Title Title D

Name ANDREWS, MICHAEL RODRIGUES, VENILDE Name Address 27343 STATE RD. 19 27343 STATE RD. 19 Address City-State-Zip: TAVARES FL 32778 City-State-Zip: TAVARES FL 32778

I hereby 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 all other like empowered.

SIGNATURE: NAJI S. KHOURI

Electronic Signature of Signing Officer/Director Detail

VTD

04/05/2015