

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N08000000249

**Entity Name:** LAKE COUNTY SOCCER CLUB, INC.

**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           TREASURER, DIRECTOR  
Name           KHOURI, NAJI S  
Address        27343 STATE RD. 19  
City-State-Zip: TAVARES FL 32778

Title           VP, DIRECTOR  
Name           VERKAIK, DARYL J  
Address        27343 STATE RD. 19  
City-State-Zip: TAVARES FL 32778

Title           D  
Name           DRIGGERS, AUTUMN  
Address        27343 STATE RD. 19  
City-State-Zip: TAVARES FL 32778

Title           D  
Name           WINKLER, BENJAMIN  
Address        27343 STATE RD. 19  
City-State-Zip: TAVARES FL 32778

Title           PRESIDENT, DIRECTOR  
Name           ANDREWS, MICHAEL  
Address        27343 STATE RD. 19  
City-State-Zip: TAVARES FL 32778

Title           SECRETARY, DIRECTOR  
Name           DURANT, LISA  
Address        27343 STATE RD. 19  
City-State-Zip: TAVARES FL 32778

Title           DIRECTOR  
Name           MARTINEZ, HOLLY  
Address        27343 STATE RD. 19  
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**

**TREASURER**

**04/03/2017**

Electronic Signature of Signing Officer/Director Detail

Date