

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N46995

**FILED**  
**Feb 22, 2013**  
**Secretary of State**  
**CC4122957149**

**Entity Name:** MELBOURNE EAU GALLIE UNITED SOCCER ASSOCIATION, INC.

**Current Principal Place of Business:**

3410 FLANAGAN AVENUE  
WEST MELBOURNE, FL 32904

**Current Mailing Address:**

PO BOX 120125  
MELBOURNE, FL 32904 US

**FEI Number: 59-3103275**

**Certificate of Status Desired: No**

**Name and Address of Current Registered Agent:**

MOHRE, DEBBIE R  
3623 WHISPERWOOD CIRCLE  
MELBOURNE, FL 32901 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 DP  
Name HERNANDEZ, VICTOR  
Address 626 BLOKE AVENUE, S.E.  
City-State-Zip: PALM BAY FL 32909

Title DVP  
Name BELLOWS, DAVID  
Address 605 HAFTEZ STREET  
City-State-Zip: PALM BAY FL 32907

Title DT  
Name MOHRE, DEBBIE  
Address 3623 WHISPERWOOD CIRCLE  
City-State-Zip: MELBOURNE FL 32901

*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: DEBBIE R. MOHRE

TREASURER

02/22/2013

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date