2004 NOT-FOR-PROJT CORPORATION ANNUAL REPORT

Apr 12, 2004 8:00 am Secretary of State **DOCUMENT #730730** 04-12-2004 90332 034 ****70.00 *CAPÉ CORAL SOCCER ASSOCIATION, INC. Principal Place of Business Mailing Address PELICAN SOCCER COMPLEX P 0 BOX 732 4020 SW 2ND CT CAPE CORAL, FL 33910 CAPE CORAL, FL 33914 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03162004 , Cho-NP CR2E037 (10/03) 4. FEI Number 59-2610047 City & State City & State Applied For Not Applicable Country Country \$8.75 Additional Π 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent ROSEN, NORMAN Street Address (P.O. Box Number is Not Acceptable) 4919 VICEROY ST CAPE CORAL, FL 33904 Zip Code 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florica. I am familiar with, and accept the obligations of registered PAUL Nuckolles SIGNATURE Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Due by May 1, 2004 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. ${ m PD}$ TITLE TITLE X Addition ₩ Deiete ☐ Change HAMÉ CAULFIELD, DAVID NAME PEER, DAVID STREET ADDRESS 1519 SW 53RD TERRACE STREET ADDRESS 1325 SE 47th Street Cape Coral, FL 33904 VPD CAPE CORAL, FL 33914 CITY-ST-ZIP CITY-ST-ZIP TITLE XXDefete ☐ Change ★ Addition TITLE HENDRICKSON, FRED E KING, ANGELA M. NAME NAME STREET ADDRESS 921 SW 51ST TERRACE STREET ADDRESS 2101 NE 15th Street CITY-ST-ZIP CAPE CORAL, FL 33914 CITY - ST-ZIP Cape Coral, FL 33909 TITLE ☐ Delete TIFLE Change ☐ Addition MITCHELL, KIMBERLY NAME NAME STREET ADDRESS 1951 LONGFELLOW DR STREET ADDRESS CITY-ST-ZIP N.FT.MYERS, FL 33903 CITY-ST-ZIP TITLE Delete TITE F Change Addition TARAS-TYDINGS, DONNA NAME SMITH-HUNTER, CATHY 1629 SW 3rd Terrace STREET ADDRESS 3733 SW 1ST AVE. STREET ADDRESS CITY-ST-ZIP CAPE CORAL, FL 33914 CITY-ST-ZIP TITLE **X** Delete ☐ Change ☐ Addition SMITH-HUNTER, KELLY NAME NAME STREET ADDRESS 1629 SW 3RD TERRACE STREET ADDRESS CAPR CORAL, FL 33914 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify 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 signature shall have the same legal effect as if made under eath; 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 10 or Block 11 if

FILED

SIGNATURE: