2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#735309

FILED Feb 14, 2009 Secretary of State

Entity Name: PAL SOCCER LEAGUE INC.

Littly Nai	HE. PAL SOCCER LEAGUE, I	NC.		
Current P	rincipal Place of Business:	New Principal Pla	ce of Business:	
P.O. BOX : NICEVILLE	50 E, FL 325880050	2403 PARKER DRI NICEVILLE, FL 329		
Current M	ailing Address:	New Mailing Addr	ess:	
P.O. BOX : NICEVILLE	50 E, FL 325880050	P.O. BOX 50 NICEVILLE, FL 329	P.O. BOX 50 NICEVILLE, FL 325880050 US	
FEI Number:	59-1672623 FEI Number App	lied For () FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Current Register	red Agent: Name and Addres	s of New Registered Agent:	
The above	KER DR E, FL 32578 US	ement for the purpose of changing its registe	ered office or registered agent, or both,	
SIGNATUF	RE:			
	Electronic Signature of F	Registered Agent	Date	
OFFICERS	S AND DIRECTORS:	ADDITIONS/CHAM	IGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Delete HILL, HOWARD 2403 PARKER DR NICEVILLE, FL 00000, 32578	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VD () Delete FARRELL, KENNETH 203 WINDWARD WAY NICEVILLE, FL 32578	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	TD () Delete ROSS, CHERYL 1310 BAYWIND DRIVE NICEVILLE, FL 32578	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () Delete TEUTENBERG, TERESA 4239 OTTERLAKE COVE NICEVILLE, FL 32578	Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, 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: HOWARD HILL PD 02/14/2009