


FILE NOW: FILING FEE IS \$61.25

FILED

Jan 28 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 739206 (1) 1. Corporation Name CENTRAL FLORIDA UNITED SOCCER CLUB, INCORPORATED					
Principal Place of Business 2108 SHIREWOOD CT. WINTER PARK FL 32792			Mailing Address 1511 NATURE COURT WINTER SPRINGS FL 32708		
2. Principal Place of Business		2a. Mailing Address			
21 Suite, Apt. #, etc.		25 Suite, Apt. #, etc.			
22 City & State		27 City & State			
23 Zip		28 Country		29 Zip	
24		25		30	
9. Name and Address of Current Registered Agent BARRETT, R. MICHAEL II 1511 NATURE COURT WINTER SPRINGS FL 32708			10. Name and Address of New Registered Agent		
81 Name			82 Street Address (P.O. Box Number is Not Acceptable)		
83			84 City		
			FL 85 Zip Code		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
12. OFFICERS AND DIRECTORS					
TITLE		PD <input checked="" type="checkbox"/> DELETE			
NAME		WILCOX, GARY			
STREET ADDRESS		2108 SHIREWOOD CT.			
CITY-ST-ZIP		WINTER PARK FL 32792			
TITLE		VD <input type="checkbox"/> DELETE			
NAME		BARRETT, R. MICHAEL			
STREET ADDRESS		1511 NATURE CT.			
CITY-ST-ZIP		WINTER SPRINGS FL 32708			
TITLE		VD <input checked="" type="checkbox"/> DELETE			
NAME		PANOS, CHRISTOPHER			
STREET ADDRESS		677 LAMOKA CT.			
CITY-ST-ZIP		WINTER SPRINGS FL 32708			
TITLE		VD <input checked="" type="checkbox"/> DELETE			
NAME		TOMPKINS, RONALD			
STREET ADDRESS		4650 MISSY WAY			
CITY-ST-ZIP		OVIEDO FL 32765			
TITLE		<input type="checkbox"/> DELETE			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE		<input type="checkbox"/> DELETE			
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
1.1 TITLE		P <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
1.2 NAME		MICHAEL HOWLER			
1.3 STREET ADDRESS		2380 PEMBERTON ST			
1.4 CITY-ST-ZIP		OVIEDO FL 32765			
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY-ST-ZIP					
3.1 TITLE		VD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
3.2 NAME		JAMES DEWITT			
3.3 STREET ADDRESS		724 S. LAKE CLAIRES CIR			
3.4 CITY-ST-ZIP		OVIEDO FL 32765			
4.1 TITLE		VD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
4.2 NAME		HAL GEORGE			
4.3 STREET ADDRESS		468 VIRGINIA AVE			
4.4 CITY-ST-ZIP		WINTER PARK FL 32789			
5.1 TITLE		VD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
5.2 NAME		WILLIAM CHRISTIE			
5.3 STREET ADDRESS		1045 ABBOTSFORD CT			
5.4 CITY-ST-ZIP		OVIEDO, FL 32765			
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
6.2 NAME					
6.3 STREET ADDRESS					
6.4 CITY-ST-ZIP					
14. 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 annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.					
SIGNATURE: <u>RONALD TOMPKINS</u> 1/10/98 407 357-9362					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					



CR2E037 (10/97)