

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 744355 (9)

1. Corporation Name

CLEARWATER SOCCER ASSOCIATION, INC.



Principal Place of Business

P.O. BOX 5334
CLEARWATER FL 34618

Mailing Address

P.O. BOX 5334
CLEARWATER FL 34618

3. Date Incorporated or Qualified
09/25/1978

3a. Date of Last Report
03/27/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-2226699

Applied For
Not Applicable

22

Suite, Apt. #, etc.

Suite, Apt. #, etc.

23

City & State

27

City & State

24

Zip Country

28

Zip Country

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STEVEN E. HAENAU
2388 GULF TO BAY BLVD.
CLEARWAER FL 34625

81 Name

Steven E. HAGENAU

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME BROOKS, DANIEL
STREET ADDRESS 2801 DOVEWOOD ST
CITY-ST-ZIP CLEARWATER FL ☐ DELETE

11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

TITLE VD
NAME FERROL, LARRY
STREET ADDRESS 2455 SANTA CRUZ AVE
CITY-ST-ZIP CLEARWATER FL ☐ DELETE

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

TITLE TD
NAME STEVEN E. HAGENAU
STREET ADDRESS 2801 BRIAR BLUFF LANE
CITY-ST-ZIP CLEARWATER FL ☐ DELETE

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

TITLE SD
NAME KATHY GIBSON
STREET ADDRESS 2775 DOVEWOOD ST
CITY-ST-ZIP CLEARWATER FL ☒ DELETE

41 TITLE ☐ Change ☒ Addition
42 NAME Laura Gunden
43 STREET ADDRESS 20 S. Orion Ave.
44 CITY-ST-ZIP Clearwater, FL 34625

TITLE VD
NAME NICK ANNENOS
STREET ADDRESS 2464 ENTERPRISE RD, UNIT 4
CITY-ST-ZIP CLEARWATER FL ☐ DELETE

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/27/95

797 2814

CR2E037 (12/95)