2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# 744355

Entity Name: CLEARWATER SOCCER ASSOCIATION, INC.

Apr 30, 2003 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 5334

CLEARWATER, FL 33758 US

Current Mailing Address: New Mailing Address:

P.O. BOX 5334

CLEARWATER, FL 33758 US

FEI Number: 59-2226699 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

HUFFMAN, JEANNINE GOMEZ, ROBIN I MR

101 SOUTH OLD COACHMAN 2818 ST JOHN DR

CLEARWAER, FL 33759 US CLEARWAER, FL 337654425 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: ROBIN I GOMEZ 04/30/2003

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

BEAVER, ALLAN

1349 DOROTHY DRIVE

CLEARWATER, FL 33764

Name:

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete OUDSHOFF, BRONSON GUNDERMAN, KATHY MRS Name: Name:

2690 DREW ST APT 1008 Address: 1826 ASBURY DR Address: City-St-Zip: CLEARWATER, FL 33759 City-St-Zip: CLEARWATER, FL 33765

Title: SD () Delete Title: (X) Change () Addition

HUBERTY, TINA Name: HUBERTY, TINA MS Name: Address: 1829 CARDINAL DR. N Address: 1829 CARDINAL DR. N City-St-Zip: CLEARWATER, FL 33759 City-St-Zip: CLEARWATER, FL 33759

Title: () Delete Title: PD (X) Change () Addition

HUFFMAN, JEANINE HUFFMAN, JEANINE MS Name: Name: Address: 2818 ST JOHN DR Address: 2818 ST JOHN DR City-St-Zip: CLEARWTER, FL 33759 City-St-Zip: CLEARWTER, FL 33759

Title: () Delete Title: (X) Change () Addition

Name: GUNDERMAN, KATHY Name: BEAVER, ALLAN MR 1826 ASBURY DR 1349 DOROTHY DRIVE Address: Address: City-St-Zip: CLEARWATER, FL 33765 City-St-Zip: CLEARWATER, FL 33764

Title: () Delete Title: (X) Change () Addition

KILIAN, KYLE GOMEZ, ROBIN I MR Name: Name:

1831 CARDINAL DR N 101 SOUTH OLD COACHMAN RD APT 115 Address: Address:

City-St-Zip: CLEARWATER, FL 33759 City-St-Zip: CLEARWATER, FL 337654425

Title: (X) Delete Title: () Change () Addition

> Name: Address: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: ROBIN I GOMEZ TD 04/30/2003