

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2006 8:00 am
Secretary of State

04-03-2006 90394 011 ****61.25

DOCUMENT # 745578					
1. Entity Name MANATEE AREA YOUTH SOCCER ORGANIZATION, INC.					
Principal Place of Business C/O MICHELE B. GRIMES 200 S. ORANGE AVE. SARASOTA, FL 34236 US			Mailing Address 200 S ORANGE AVENUE SARASOTA, FL 34236 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	03222006 Chg-NP CR2E037 (11/05)	
4. FEI Number 59-2243243				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GRIMES, MICHELE B 200 SOUTH ORANGE AVE. SARASOTA, FL 34236			7. Name and Address of New Registered Agent		
Name			Street Address (P.O. Box Number is Not Acceptable)		
City			FL 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 Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ (NOTE: Registered Agent signature required when re-registering) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE PD	NAME GRIMES, MICHELE B	<input checked="" type="checkbox"/> Delete	TITLE P	NAME Moseley, Tom	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 200 SOUTH ORANGE AVE.	CITY-ST-ZIP SARASOTA, FL 34236		STREET ADDRESS 200 South Orange Avenue	CITY-ST-ZIP Sarasota, FL 34236	
TITLE VD	NAME MARCINKO, DAVE	<input checked="" type="checkbox"/> Delete	TITLE V	NAME Halmi, Gail	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 200 SOUTH ORANGE AVE.	CITY-ST-ZIP SARASOTA, FL 34236		STREET ADDRESS 200 South Orange Avenue	CITY-ST-ZIP Sarasota, FL 34236	
TITLE TD	NAME ROCKLEIN, JOE	<input checked="" type="checkbox"/> Delete	TITLE S	NAME VanAlstyne, Trish	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 200 SOUTH ORANGE AVE.	CITY-ST-ZIP SARASOTA, FL 34236		STREET ADDRESS 200 South Orange Avenue	CITY-ST-ZIP Sarasota, FL 34236	
TITLE SD	NAME NORDBYE, RENEE	<input checked="" type="checkbox"/> Delete	TITLE T	NAME Rocklein, Joe	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 200 S ORANGE AVENUE	CITY-ST-ZIP SARASOTA, FL 34236		STREET ADDRESS 200 South Orange Avenue	CITY-ST-ZIP Sarasota, FL 34236	
TITLE D	NAME CARSON, CHERYL	<input checked="" type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS 200 S ORANGE AVENUE	CITY-ST-ZIP SARASOTA, FL 34236		STREET ADDRESS	CITY-ST-ZIP	
TITLE	NAME	<input type="checkbox"/> Delete	TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS	CITY-ST-ZIP		STREET ADDRESS	CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like information.					
SIGNATURE: <i>Michele B. Grimes - Director</i> 4/10/06					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

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