

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746756

FILED
Jan 23, 2006
Secretary of State

Entity Name: ORMOND BEACH SOCCER CLUB, INC.

Current Principal Place of Business:

700 HULL ROAD
ORMOND BEACH, FL 32174 US

New Principal Place of Business:

Current Mailing Address:

P O BOX 730664
ORMOND BEACH, FL 32173664 US

New Mailing Address:

FEI Number: 59-1994108

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OBERST, JEANETTE
377 BROOKLINE AVE
DAYTONA BEACH, FL 32118 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: BEAUDOIN, PAUL
Address: 23 PARKVIEW LANE
City-St-Zip: ORMOND BEACH, FL 32174

Title: PD () Delete
Name: OBERST, JEANETTE
Address: 377 BROOKLINE AVENUE
City-St-Zip: DAYTONA BEACH, FL 32118

Title: TD () Delete
Name: EDWARDS, NANCY
Address: 260 N. HALIFAX DRIVE
City-St-Zip: ORMOND BEACH, FL 32176

Title: SD () Delete
Name: BEAUDOIN, BECKY
Address: 32 PARKVIEW LANE
City-St-Zip: ORMOND BEACH, FL 32174

Title: D () Delete
Name: PASPALAKIS, CHRIS
Address: 1609 N. HALIFAX AVE
City-St-Zip: DAYTONA BEACH, FL 32118

Title: VD () Delete
Name: YARNELL, STACEY
Address: 984 SHOCKNEY DRIVE
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 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: NANCY JACKSON EDWARDS

TD

01/23/2006

Electronic Signature of Signing Officer or Director

Date