FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

2. Principal Place of Business

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2a. Mailing Address

FLORIDA YOUTH SOCCER ASSOCIATION, INC.

FILED Mar 09 1998 8:00am Secretary of State

TEORIBA TOOTH GOODE.	AND OUR HOUSE	
Principal Place of Business	Mailing Address	T LEGALS FEBRU BIRTH LOSIN SUIDE STILLS BIRTH BIRTH BIRTH BIRTH BIRTH BIRTH BIRTH CASH
8 BROADWAY SUITE B	8 BROADWAY SUITE B	3. Date Incorporated or Qualified 07/03/1979
KISSIMEE FL 34741	KISSIMMEE FL 34741	4. FEI Number Applied For

21		26			Fee Required	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			Election Campaign Financing \$5.00 May Be	
22		27			Trust Fund Contribution Added to Fees	
City & State	0	City & State			7. Is this nonprofit corporation a homeowners association?	
23		28			☐ Yes 💢 No	
Zip	Country	Zip	Country	<i>!</i>	8. This corporation owes or has paid the current year Intangible	
24	[25]		30	 	Personal Property Tax due June 30. X Yes No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent						
			61	Name		
DAVIS, JOE			82	82 Street Address (P.O. Box Number is Not Acceptable)		
1539 HIALEAH ST.						
ORLANDO FL 32808			83			
			84	City	85 Zip Code	
				,	FL	
11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508, Florida Statutes	s, the above	e-named co	orporation submits this statement for the purpose of changing its registered	
agent. I a	m familiar with, and accept the objic	setions of Section 617.0503, Flor	ida Statute	6.	ration's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Marsol H	ah Viak			7-48	
	inname, typed or printed name of regulaters ag			per erutangia tne	quired when reinstating) DATE	
12. (ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition	
NAME	DAVIS, JOE		1.2 NAME			
STREET ADDRESS	1539 HIALEAH ST.		1.3 STREET	ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32808		1.4 CITY-S			
TITLE	DS	DELETE	2.1 TITLE		DS Change Addition	
NAME	Z INKE, LEA	·	2.2 NAME		RANDY WILLIAMS CIR WEST	
STREET ADDRESS	1399 S BELCHER, #214		2.3 STREET	ADDRESS	RANDY WILLIAMS 1824 SPICEBERRY CIR WEST TACKSONVILLE FL 32246	
CITY-ST-ZIP	LARGO FL		2. 4 CITY-	ST-ZIP		
TITLE	DT	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition	
NAME	SMITH, JIM		3.2 NAME			
STREET ADDRESS	404 CORNWALL RD		3.3 STREET	ADDRESS		
CITY-ST-ZIP	WINTER PARK FL		3.4. CITY -			
TITLE	•	☐ DELETE	4.1 TITLE	1	DVP Change X Addition	
Name			4. 2 NAME	- 15	JUHN GAFFNEK, AD	
STREET ADDRESS			4.3 STREET	ADDRESS	232 WOOD HALL OR - CV A	
CITY-ST-ZIP			4.4 CITY-S	ST-ZIP	DVP JUHN GAFFNEY 232 WOOD HALL DR MULBERRY, FL 33860	
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME			5.2 NAME	1		
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY-ST-ZIP		, <u>,</u>	5.4 CITY- 9	ST-ZIP		
TITLE		☐ DELETÉ	6.1 TITLE		☐ Change ☐ Addition	
			0.0 114445			

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.

6.3 STREET ADDRESS

STREET ADDRESS

Not Applicable

\$8.75 Additional