2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#747936

FILED Jan 04, 2005 Secretary of State

Entity Name: FLORIDA YOUTH SOCCER ASSOCIATION, INC.

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

8034 SUNPORT DRIVE STE 404 AND 405 ORLANDO, FL 32809 US

Current Mailing Address: New Mailing Address:

8034 SUNPORT DRIVE STE 404 AND 405 ORLANDO, FL 32809 US

FEI Number: 59-1864634 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:

NEWTON, BARBARA

12001 LITTLEBURY CT
TAMPA, FL 33635 US

NEWTON, BARBARA
6748 MARINA POINTE VILLAGE COURT
BUILDING 1, #204
TAMPA, FL 33635 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: 01/04/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP () Delete Title: DP (X) Change () Addition
Name: NEWTON, BARBARA Name: NEWTON, BARBARA

Address: 12001 LITTLEBERRY COURT Address: 6748 MARINA PT VILLAGE COURT, BLDG 1, #204

City-St-Zip: TAMPA, FL 33635 City-St-Zip: TAMPA, FL 33635

Title: DVP () Delete Title: () Change () Addition

 Name:
 MATLAK, JERRY
 Name:

 Address:
 4445 NW 112TH AVE
 Address:

 City-St-Zip:
 CORAL GABLES, FL 33065
 City-St-Zip:

Title: DT () Delete Title: () Change () Addition

 Name:
 SHEPARD, MAC
 Name:

 Address:
 1059 BAY CIRCLE
 Address:

 City-St-Zip:
 PANAMA CITY BEACH, FL 32407
 City-St-Zip:

Title: DS () Delete Title: () Change () Addition

 Name:
 ROSEN, NORMAN
 Name:

 Address:
 4919 VICEROY STREET
 Address:

 City-St-Zip:
 CAPE CORAL, FL 33904
 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: BARBARA NEWTON DP 01/04/2005