

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755436

FILED
Aug 25, 2008
Secretary of State

Entity Name: BLACK WATCH SOCCER CLUB, INC.

Current Principal Place of Business:

1302 N. 34 ST.
TAMPA, FL 33605 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 82143
TAMPA, FL 33682

New Mailing Address:

1302 N. 34 ST.
TAMPA, FL 33605 US

FEI Number: 59-2958107 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

ROBINSON, CHARLES
1302 N. 34 ST.
TAMPA, FL 33605 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: DVP () Delete
Name: COBB, CHRIS
Address: 3204 HOEDT ROAD
City-St-Zip: TAMPA, FL 33618

Title: P (X) Delete
Name: RODRIGUEZ, JUAN
Address: 9110 EXPOSITION DR
City-St-Zip: TAMPA, FL 33626

Title: D () Delete
Name: ROBINSON, CHARLES
Address: 1001 86 AVE. N.
City-St-Zip: ST. PETE, FL 33702

Title: D () Delete
Name: LAYTON, MELISSA
Address: 8706 ASH WORTH DR
City-St-Zip: TAMPA, FL 33647

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: SHELTON, MARK
Address: 1519 DALE MABRY HWY.
City-St-Zip: LUTZ, FL 33549

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

Title: D/TR (X) Change () Addition
Name: ROBINSON, CHARLES
Address: 1001 86 AVE. N.
City-St-Zip: ST. PETE, FL 33702

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

I hereby certify that the information supplied with this filing does not qualify 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: CHARLES ROBINSON

D/TR

08/25/2008

Electronic Signature of Signing Officer or Director

Date