

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 28 AM 8:56

DOCUMENT # 759318 (9)

1. Corporation Name
TAMARAC SOCCER CLUB, INC.

Principal Place of Business P.O. BOX 26835 TAMARAC FL 33320-6835	Mailing Address P.O. BOX 26835 TAMARAC FL 33320-6835
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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3. Date Incorporated or Qualified 07/27/1981	3a. Date of Last Report 05/01/1994
4. FEI Number NOT APPLICABLE	Applied For ☒ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☒	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent

HERSH, ARNOLD
8240 NW 46TH ST.
LAUDERHILL FL 33351

10. Name and Address of New Registered Agent

81 Name ARNOLD POUCH
82 Street Address (P.O. Box Number is Not Acceptable)
8240 NW 66 TERR.
83
84 City TAMARAC FL 85 Zip Code 33321

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE *Arnold Pouch* DATE 4-12-96

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD HERSH, ARNOLD 8240 NW 46TH ST. LAUDERHILL FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	PRESIDENT/D ARNOLD POUCH 8240 NW 66 TERR. TAMARAC, FL. 33321
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V RUSTY, POUCH 8240 NW 66TH TERRACE TAMARAC FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	S CUSHMAN, JESSICA 66 CANTERBERRY LANE TAMARAC FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	VERHELST, NANCY 8620 NW 54TH STREET LAUDERHILL, FL. 33351
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD BUA, LINDA 8117 NW 73RD TERRACE TAMARAC FL	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	C ALEXANDER, GUY 7012 NW 78TH AVE. TAMARAC FL	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	HILL, TOM 7802 NW 73RD AVE TAMARAC, FL 33321
TITLE NAME STREET ADDRESS CITY - ST - ZIP	FERNANDEZ, DAN 8095 NW 71ST COURT TAMARAC, FL. 33321	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	TRAV. Commissioner

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(4), 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.

SIGNATURE: *Arnold Pouch* DATE 4-12-96