

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763720

FILED
Feb 08, 2011
Secretary of State

Entity Name: CENTRAL BREVARD SOCCER, INC.

Current Principal Place of Business:

5190 WILDWOOD AVE
MERRITT ISLAND, FL 32953

New Principal Place of Business:

5190 WILDWOOD AVE
ADDRESS<>ADDRESS2
MERRITT ISLAND, FL 32953

Current Mailing Address:

P.O. BOX 540241
MERRITT ISLAND, FL 329540241

New Mailing Address:

P.O. BOX 540241
ADDRESS<>ADDRESS2
MERRITT ISLAND, FL 329540241

FEI Number: 59-2193805

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RYE, BRIAN
5190 WILDWOOD AVE.
MERRITT ISLAND, FL 32953 US

Name and Address of New Registered Agent:

RYE, BRIAN
5190 WILDWOOD AVE.
ADDRESS<>ADDRESS2
MERRITT ISLAND, FL 32953 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:

02/08/2011

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD
Name: LEWIS, MAUREEN
Address: 610 ALBATROSS STREET
City-St-Zip: MERRITT ISLAND, FL 32952

Title: VP
Name: BLAUE, SCOTT
Address: 5240 WILDWOOD AVE
City-St-Zip: MERRITT ISLAND, FL 32953

Title: PD
Name: RYE, BRIAN
Address: 5190 WILDWOOD AVE.
City-St-Zip: MERRITT ISLAND, FL 32953

Title: SD
Name: SCHRACK, ROB
Address: 1750 CANAL COURT
City-St-Zip: MERRITT ISLAND, FL 32953

I hereby 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 all other like empowered.

SIGNATURE: MAUREEN LEWIS

TD

02/08/2011

Electronic Signature of Signing Officer or Director

Date