2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT#763903

Entity Name: DELRAY BEACH SOCCER LEAGUE, INC.

FILED Apr 22, 2002 8:00 AM Secretary of State

Current Principal Place of Business: New Principal Place of Business: 490 DOTTEREL RD. DELRAY BEACH, FL 33444 US **Current Mailing Address: New Mailing Address:** P.O BOX 2534 DELRAY BEACH, FL 334472534 US FEI Number: 59-2241199 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: DEAN, S. TURNER 3430 ÓLEANDER WAY DELRAY BEACH, FL 33483 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete PETERSON, MIKE Name: Name: 1004 NW 3RD AVE Address: Address: City-St-Zip: DELRAY BEACH, FL 33444 City-St-Zip: Title: () Delete Title: () Change () Addition Name: DEAN, S. TURNER Name: Address: 3430 OLEANDER WAY Address: City-St-Zip: DELRAY BEACH, FL 33483 City-St-Zip: Title: () Delete Title: () Change () Addition WALKER, CHUCK Name: Name: Address: 802 NW 1ST AVE Address: City-St-Zip: DELRAY BEACH FL, 33444 City-St-Zip: Title: Title: () Change () Addition () Delete LANZA, BOBBÝ Name: Name: 3531 BLVD. CHATELAINE Address: Address: City-St-Zip: DELRAY BEACH, FL 33445 City-St-Zip: Title: Title: () Delete () Change () Addition

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.

Name:

Address:

City-St-Zip:

SIGNATURE: CHUCK WALKER P 04/22/2002

MORGAN, JULIE

450 S. SWINTON AVE

DELRAY BCH, FL 33444

Name:

Address:

City-St-Zip: