2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT FILED Aug 23, 2007 **DOCUMENT#763903** Secretary of State

Entity Name: DELRAY BEACH SOCCER CLUB, INC. **Current Principal Place of Business: New Principal Place of Business:** 777 EAST ATLANTIC AVENUE Z-248 DELRAY BEACH, FL 33483 **New Mailing Address: Current Mailing Address:** 777 EAST ATLANTIC AVENUE 7-248 DELRAY BEACH, FL 334838352 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: MORRISON, DALE 309 NE FIRST STREET 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 THOMPSON, ARNOLD Name: Name: 1307 NW 8 COURT Address: Address: City-St-Zip: BOYNTON BEACH, FL 33426 City-St-Zip: Title: () Delete Title: () Change () Addition THOMPSON, NINA Name: Name: Address: 1307 NW 8 COURT Address: BOYNTON BEACH, FL 33426 US City-St-Zip: City-St-Zip: Title: () Delete Title: VPD (X) Change () Addition CHESLACK, BRIAN KOOLIK, IAN Name: Name: 1901 NW 2 AVENUE Address: Address: 2499 GLADES ROAD, #103 City-St-Zip: DELRAY BEACH, FL 33444 US City-St-Zip: BOCA RATON, FL 33431 US Title: **VPDS** () Delete Title: () Change () Addition Name: LANZA, BOBBY Name: 760 EAST OCEAN BOULEVARD Address: Address: City-St-Zip: BOYNTON BEACH, FL 33435 US City-St-Zip: Title: () Delete Title: () Change () Addition MORRISON, DALE Name: Name: 309 NE FIRST STREET Address: Address: City-St-Zip: DELRAY BEACH, FL 33483 US City-St-Zip: Title: () Delete Title: () Change () Addition THOMPSON, BRIAN Name: Name: Address: 1307 NW 8 COURT Address: BOYNTON BEACH, FL 33426 US City-St-Zip: 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: DALE MORRISON D 08/23/2007