

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763903

FILED
Jan 16, 2008
Secretary of State

Entity Name: DELRAY BEACH SOCCER CLUB, INC.

Current Principal Place of Business:

777 EAST ATLANTIC AVENUE
Z-248
DELRAY BEACH, FL 33483 US

New Principal Place of Business:

Current Mailing Address:

777 EAST ATLANTIC AVENUE
Z-248
DELRAY BEACH, FL 334838352 US

New Mailing Address:

FEI Number: 59-2241199

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MORRISON, DALE
309 NE FIRST STREET
DELRAY BEACH, FL 33483 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: T () Delete
Name: THOMPSON, ARNOLD
Address: 1307 NW 8 COURT
City-St-Zip: BOYNTON BEACH, FL 33426

Title: AT () Delete
Name: THOMPSON, NINA
Address: 1307 NW 8 COURT
City-St-Zip: BOYNTON BEACH, FL 33426 US

Title: VPD () Delete
Name: KOOLIK, IAN
Address: 2499 GLADES ROAD, #103
City-St-Zip: BOCA RATON, FL 33431 US

Title: VPDS () Delete
Name: LANZA, BOBBY
Address: 760 EAST OCEAN BOULEVARD
City-St-Zip: BOYNTON BEACH, FL 33435 US

Title: D () Delete
Name: MORRISON, DALE
Address: 309 NE FIRST STREET
City-St-Zip: DELRAY BEACH, FL 33483 US

Title: PD () Delete
Name: THOMPSON, BRIAN
Address: 1307 NW 8 COURT
City-St-Zip: BOYNTON BEACH, FL 33426 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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: DALE MORRISON

D

01/16/2008

Electronic Signature of Signing Officer or Director

Date