2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#767094

Entity Name: PENSACOLA FUTBOL CLUB INC.

FILED May 12, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10360 ASHTON BROSNAHAM ROAD PENSACOLA, FL 32534

Current Mailing Address: New Mailing Address:

10360 ASHTON BROSNAHAM ROAD PENSACOLA, FL 32534

FEI Number: 59-3139411 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

HAYES, GENA M 10360 ÁSHTON BROSNAHAM ROAD PENSACOLA, FL 32534

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:

() Delete (X) Change () Addition

WILLIS, STEVE STONE, ROBERT Name: Name: Address: 10360 ASHTON BROSNAHAM ROAD Address: 10360 ASHTON BROSNAHAM ROAD

City-St-Zip: PENSACOLA, FL 32534 City-St-Zip: PENSACOLA, FL 32534

Title: () Delete Title: (X) Change () Addition

Name: WALKER, DAVIA Name: LACEY, CATHY Address: 10360 ASHTON BROSNAHAM ROAD Address: 10360 ASHTON BROSNAHAM ROAD

City-St-Zip: PENSACOLA, FL 32534

PENSACOLA, FL 32534 City-St-Zip:

Title: () Delete Title: (X) Change () Addition HAYES, GENA M WELSH, IAN Name: Name:

10360 ASHTON BROSNAHAM ROAD 10360 ASHTON BROSNAHAM ROAD Address: Address:

City-St-Zip: PENSACOLA, FL 32534 City-St-Zip: PENSACOLA, FL 32534

Title: () Delete Title: () Change () Addition

Name: WERDUNG, DAVID A Name: Address: 793 CEDAR TREE LANE Address: City-St-Zip: CANTONMENT, FL 32533 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: GENA M HAYES RΑ 05/12/2009