FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 768807

(0)

OSCEOLA YOUTH SOCCER ASSOCIATION, INC.

Principal Place of Business Mailing Address									(1861) (1861) 61181 19181 1911 1911 1911 1911 1911 19			
9751 -98TH ST. NO. SEMINOLE FL 34647 US				P.O. BOX 10071 LARGO FL 33773-0071								
US			00						3. Date Incorporated or Qualified			
2. Principal Pl	ace of Busi	ness	2a . Ma	2a. Mailing Address					4. FEI Number NOT APPLICABLE Applied For Not Applied			
21			26									
Suite, Apt.	#, etc.		}- -1	ite, Apt. #, etc.					5. Certificate of Status Desired			
City & State			27 Cit	ly & State								
23	5		— — `	28					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip		Country	Zip)	Cou	untry	'		8. This corporation has liability for intangible tax under s. 199.032,			
24 337	777	25	29		30	Ī			Florida Statutes Yes No			
		and Address of Curre	ent Registere	d Agent					10. Name and Address of New Registered Agent			
						81	Na	me				
HAASE, DONNA						82	Stre	eet Add	Address (P.O. Box Number is Not Acceptable)			
	CHANTME	nt drive				Ш						
LARGO F	L 34643					83	İ					
						84	Cit	у	FL 85 Zip Code 33.77.3			
11. Pursuant t	to the provis	sions of Sections 617.05	502 and 617.1	508, Florida Stati	utes, the a	bove	e-nan	ned cor	progration submits this statement for the purpose of changing its register			
office or re agent I a	egistered ag m familiar w	gent, or both, in the Sta /ith, and accept the obl	te of Fiorida. Signations of, Se	ouch change was ection 617.0503, F	s autnorize Florida Sta	tutes	/ ine S	corpora	progration submits this statement for the purpose of changing its register ration's board of directors. I hereby accept the appointment as registered			
SIGNATURE												
	Signature type	d or printed name of registered a				o Ape	enl sign	nature reco	guired when reinstating) DATE			
12.	VD	OFFICERS A	ND DIRECTO	DELETE	13.	ar t			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE NAME	BRYANT	r FARI		C) pecete		IAME			Line Ormingo Line Produi			
STREET ADDRESS		2ND STREET NORTH	H				ADDRE	cec				
CITY-ST-ZIP	LARGO						37-ZIP					
TITLE	PD			☐ DELETE	2.1 1)1 - <u>4</u> 14		Change Addii			
NAME		DONNA			2.2 N	AME						
STREET ADDRESS		NCHANTMENT DRIVE	:		2.3 S	TREET	ADDRI	ESS				
CITY-ST-ZIP	LARGO	FL			2.41	CITY-S	ST-ZIP	.]				
TITLE	SD			DELETE	3.1 T	ITLE			6 D			
NAME		E, RUTH ANN			3.2 N	IAME			4nn Greene. 8693 91 st Terr.			
STREET ADDRESS		ND WAY NORTH			3.3 9	TREET	ADDRI	ESS 3	8693 413 1011			
CITY-ST-ZIP	LARGO	FL.					ST-ZIP		Largo, FC			
TITLE	TD	V 0	•	DELETE	4.1 T				Change Addit			
NAME	JONES,	COTT DRIVE				NAME						
STREET ADDRESS	SEMINO						ADDRI	ESS				
CITY-ST-7IP	OLMING	/LL L		DELETE	4.4 C		ST-ZIP	 	Change Addi			
NAME						IAME						
STREET ADDRESS							(ADDR	ESS				
CITY-ST-ZIP							ST- ZIP					
TITLE			***************************************	☐ DELETE	6.1 T		·i-···		☐ Change ☐ Addi			
NAME					6.2 8	AME		İ				
STREET ADDRESS					6.3 \$	TREET	ADDRI	ESS				
CITY-ST-ZIP							ST-ZIP					
14. I do heret informatio	by certify the indicated	at the information supplied on this annual report of	lied with this fi ir supplement	iling does not qua al annual report is	alify for the s true and	8CCL	emptie urate	on state and the	ted in Section 119.07(3)(i), Florida Statutes. I further certify that the nat my signature shall have the same legal effect as if made under oath;			
I am an o	fficer or dire	ector of the corporation or Block 13 if changed,	or the receive	or trustee empo	owered to	өхөс	cute t	his repo	nat my signature shall have the same legal effect as if made under oath; port as required by Chapter 617, Florida Statutes; and that my name			
phhears (TENDON 16	S. S. S. To ii olianged,	Januarian			gas s	*	T /	1/20/04			

Daytime Phone # 0051735

FILED

Apr 17 1997 8:00am

Secretary of State

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