

**2007 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

**May 02, 2007 08:00 A  
Secretary of State**

**DOCUMENT # 770327**

1. Entity Name  
**PERRY SOCCER ASSOCIATION, INC.**



Principal Place of Business  
**3477 GOLF COURSE ROAD  
PERRY, FL 32348 US**

Mailing Address  
**3477 GOLF COURSE ROAD  
PERRY, FL 32348 US**



05012007 No Chg-NP

CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**72-0001180**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional  
Fee Required**

**6. Name and Address of Current Registered Agent**

**PARKER, KAY  
3477 GOLF COURSE ROAD  
PERRY, FL 32348**

**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25  
Due by May 1, 2007**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE PT  
NAME PARKER, KAY  
STREET ADDRESS 3477 GOLF COURSE ROAD  
CITY-ST-ZIP PERRY, FL 32348

TITLE S  
NAME WENTWORTH, CAROL  
STREET ADDRESS 4827 BETHEA ROAD  
CITY-ST-ZIP PERRY, FL 32348

TITLE V  
NAME THOMAS, CAL  
STREET ADDRESS 306 GLENRIDGE RD  
CITY-ST-ZIP PERRY, FL 32347

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U00000757710  
05/23/07-80083-011 61.25  
**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Kay Parker  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-29-07

Date

850-838-6025

Daytime Phone #