2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 13, 2009
Secretary of State

DOCUMENT# 851691

Entity Name: AMERICAN YOUTH SOCCER ORGANIZATION, INC.

Current Principal Place of Business:

12501 S ISIS
HAWTHORNE, CA 90250 US

New Principal Place of Business:

Current Mailing Address:

12501 S ISIS
HAWTHORNE, CA 90250 US

New Mailing Address:

FEI Number: 95-6205398 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301 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:	NBOD	( ) Delete
Name:	WADE, MICHAEL	
Address:	123 VIA GENOA	
City-St-Zip:	NEWPORT BEADH, CA 92664	
Title:	NS	( ) Delete
Name:	SCHAUER, JIM	
Address:	424 E. WINDY PEAK CIRCLE	
City-St-Zip:	TUCSON, AZ 85704	
Title:	NT	( ) Delete
Name:	STERN, JEFF	
Address:	517 MADISON	
City-St-Zip:	GLENCOE, IL 60022	
Title:	VP	( ) Delete
Name:	BERRIZ, PAULA	
Address:	27207 APPALOOSA RD	
City-St-Zip:	SAN CLARITA, CA 91387	

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
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: PAULA BERRIZ VP 04/13/2009

Electronic Signature of Signing Officer or Director — Date