2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L06000121803

Entity Name: FLORIDA SOCCER ACADEMY LLC

FILED Mar 19, 2008 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
Current Frincipal Flace Of Business.	New Fillicipal Flace Of Dusiliess.

1232 SE PALM BEACH RD 5299 SE REDWOOD AVE PORT ST. LUCIE, FL 34952 STUART, FL 34997

Current Mailing Address: New Mailing Address:

1232 SE PALM BEACH RD 5299 SE REDWOOD AVE PORT ST. LUCIE, FL 34952 STUART, FL 34997

FEI Number: 36-4599845 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

DUFFIN, STUART

1232 SE PALM BEACH RD

PORT ST. LUCIE, FL 34952 US

DAVID, ROBERTSON

274 SW LAKE FOREST WAY

PORT ST. LUCIE, FL 34986 US

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: DAVID ROBERTSON 03/19/2008

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS: ADDITIONS/CHANGES:

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

 Name:
 CAICEDO, HUGO
 Name:

 Address:
 2773 SE GARFIELD AVE
 Address:

 City-St-Zip:
 PORT ST. LUCIE, FL 34952
 City-St-Zip:

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

 Name:
 POWER, TOM
 Name:
 POWER, TOM

 Address:
 7982 SE HIGHPOINT WAY
 Address:
 5299 SE REDWOOD

 Address:
 7982 SE HIGHPOINT WAY
 Address:
 5299 SE REDWOOD AVE

 City-St-Zip:
 HOBE SOUND, FL 33455
 City-St-Zip:
 STUART, FL 34997

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

 Name:
 ROBERTSON, DAVID
 Name:

 Address:
 274 SW LAKE FOREST WAY
 Address:

 City-St-Zip:
 PORT ST. LUCIE, FL 34986
 City-St-Zip:

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

 Name:
 DUFFIN, STUART
 Name:

 Address:
 1232 SE PALM BEACH RD
 Address:

 City-St-Zip:
 PORT ST. LUCIE, FL 34952
 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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: DAVID ROBERTSON MR 03/19/2008