2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005441

Entity Name: PALM HARBOR RECREATIONAL SOCCER CLUB, INC.

FILED Jul 13, 2004 Secretary of State

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

1968 BAYSHORE BOULEVARD PO BOX 69

DUNEDIN, FL 34698 PALM HARBOR, FL 34682

Current Mailing Address: New Mailing Address:

1968 BAYSHORE BOULEVARD PO BOX 691

DUNEDIN, FL 34698 PALM HARBOR, FL 34682

FEI Number: 59-3462313 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

CIANFRONE, JOSEPH R LAROCCA, MIKE 1968 BAYSHORE BOULEVARD PO BOX 691

DUNEDIN, FL 34698 PALM HARBOR, FL 34682

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: MIKE LAROCCA 07/13/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: VSD () Delete Title: D (X) Change () Addition

 Name:
 ROCCA, MICHAEL L
 Name:
 ROCCA, MICHAEL L

 Address:
 1986 SPANISH PINE DR
 Address:
 1986 SPANISH PINE DR

 City-St-Zip:
 DUNEDIN, FL 34698
 City-St-Zip:
 DUNEDIN, FL 34698

Title: D () Delete Title: D (X) Change () Addition Name: CIANFRONE, JOSEPH R Name: JARDINE, BRET

Address: 848 HILLSIDE DRIVE Address: PO BOX 691

City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip: PALM HARBOR, FL 34682

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

 Name:
 DINSMORE, TIM
 Name:
 DINSMORE, TIM

 Address:
 3718 WOODRIDGE PL
 Address:
 3718 WOODRIDGE PL

 City-St-Zip:
 PALM HARBOR, FL 34684
 City-St-Zip:
 PALM HARBOR, FL 34684

 Name:
 TARLETON, JÓHN K
 Name:
 KAMINSKI, JEFF

 Address:
 1659 E ORANGEEREST AVE.
 Address:
 PO BOX 691

City-St-Zip: PALM HARBOR, FL 34683 City-St-Zip: PALM HARBOR, FL 34682

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MIKE LAROCCA D 07/13/2004

Electronic Signature of Signing Officer or Director

Date