

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005441

FILED
Apr 14, 2006
Secretary of State

Entity Name: PALM HARBOR RECREATIONAL SOCCER CLUB, INC.

Current Principal Place of Business:

PO BOX 691
PALM HARBOR, FL 34682

New Principal Place of Business:

Current Mailing Address:

PO BOX 691
PALM HARBOR, FL 34682

New Mailing Address:

FEI Number: 59-3462313

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAROCCA, MIKE
PO BOX 691
PALM HARBOR, FL 34682 US

Name and Address of New Registered Agent:

HASLAM, REX
PO BOX 691
PALM HARBOR, FL 34682 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: REX HASLAM

04/14/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: O (X) Delete
Name: LAROCCA, MICHAEL
Address: 1986 SPANISH PINE DR
City-St-Zip: DUNEDIN, FL 34698

Title: O () Delete
Name: JARDINE, BRET T
Address: PO BOX 691
City-St-Zip: PALM HARBOR, FL 34682

Title: O () Delete
Name: HASLAM, REX
Address: PO BOX 691
City-St-Zip: PALM HARBOR, FL 34682

Title: O () Delete
Name: CERALO, MARK
Address: PO BOX 691
City-St-Zip: PALM HARBOR, FL 34682

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: O (X) Change () Addition
Name: PHILLIPS, PHIL
Address: PO BOX 691
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 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: BRET JARDINE

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04/14/2006

Electronic Signature of Signing Officer or Director

Date