

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000005450

FILED
Jan 07, 2005
Secretary of State

Entity Name: BAY UNITED SOCCER CLUB, INC.

Current Principal Place of Business:

1712 SCARLETT BLVD.
LYNN HAVEN, FL 32444

New Principal Place of Business:

3216 PLEASANT HILL RD.
LYNN HAVEN, FL 32444

Current Mailing Address:

PO BOX 15275
PANAMA CITY, FL 32406

New Mailing Address:

FEI Number: 59-3252190

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACQUAY, CHRISTI
1712 SCARLETT BLVD.
LYNN HAVEN, FL 32444 US

Name and Address of New Registered Agent:

HALL, NATHALIE L
3216 PLEASANT HILL RD.
LYNN HAVEN, FL 32444 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: NATHALIE L. H ALL

01/07/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VPD () Delete
Name: ENGLAND, C.O.
Address: 608 CARRIE LANE
City-St-Zip: LYNN HAVEN, FL 32444

Title: PD () Delete
Name: CROWLEY, STEVE
Address: 1206 BUENA VISTA BLVD
City-St-Zip: PANAMA CITY, FL 32401

Title: SD () Delete
Name: PERKS, ANDREA
Address: 4329 NORTH SHORE RD
City-St-Zip: LYNN HAVEN, FL 32444

Title: TD () Delete
Name: HALL, NATHALIE
Address: 1712 SCARLETT BLVD.
City-St-Zip: LYNN HAVEN, FL 32444

Title: D () Delete
Name: INGRAM, MICHAEL
Address: 3105 ISLAND VIEW DR
City-St-Zip: PANAMA CITY, FL 32405

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: SD (X) Change () Addition
Name: PERLES, ANDREA
Address: 4329 NORTH SHORE RD
City-St-Zip: LYNN HAVEN, FL 32444

Title: TD (X) Change () Addition
Name: HALL, NATHALIE
Address: 3216 PLEASANT HILL RD.
City-St-Zip: LYNN HAVEN, FL 32444

Title: D (X) Change () Addition
Name: BAUMGARTNER, ANGELA
Address: 1325 WEST PARK LANE
City-St-Zip: PANAMA CITY, FL 32404

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: NATHALIE L. HALL

TD

01/07/2005

Electronic Signature of Signing Officer or Director

Date