## 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000005450

Entity Name: BAY UNITED SOCCER CLUB, INC.

FILED Mar 06, 2008 Secretary of State

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

PO BOX 15275 1201 HARRISON AVE PANAMA CITY, FL 32406 PANAMA CITY, FL 32401

Current Mailing Address: New Mailing Address:

PO BOX 15275

PANAMA CITY, FL 32406

FEI Number: 59-3252190 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:

CROWLEY, STEVE GEIGER, DANIEL W
1206 BUENA VISTA BLVD 1201 HARRISON AVE

PANAMA CITY, FL 32401 US PANAMA CITY, FL 32401 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: DANIEL W. GEIGER 03/06/2008

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: VPD ( ) Delete Title: VPD (X) Change ( ) Addition

Name: HALL, ROBERT Name: SCHNOERING, SHEILA
Address: 3216 PLEASANT HILL RD. Address: 8629 N LAGOON DR

City-St-Zip: LYNN HAVEN, FL 32444 City-St-Zip: PANAMA CITY BEACH, FL 32408

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: CROWLEY, STEVE Name: GEIGER, DANIEL W

 Address:
 1206 BUENA VISTA BLVD
 Address:
 1549 HWY 389

 City-St-Zip:
 PANAMA CITY, FL 32401
 City-St-Zip:
 LYNN HAVEN, FL 32444

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

 Name:
 PATTY, MCDANIEL
 Name:
 DEANN, MULLINS

 Address:
 258 EAGLE DRIVE
 Address:
 3116 COUNTRY CLUB DR

 City-St-Zip:
 PANAMA CITY BEACH, FL 32407
 City-St-Zip:
 LYNN HAVEN, FL 32444

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

 Name:
 HALLMON, KATHERINE
 Name:
 HALLMON, KATHARINE

 Address:
 3714 TIPPECANOE LN
 Address:
 3714 TIPPECANOE LN

 City-St-Zip:
 PANAMA CITY, FL 32409
 City-St-Zip:
 PANAMA CITY, FL 32409

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

 Name:
 BOND, ANTHONY
 Name:

 Address:
 2204 CORAL DR.
 Address:

 City-St-Zip:
 LYNN HAVEN, FL 32444
 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: DANIEL W. GEIGER PD 03/06/2008