


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 21, 2006 8:00 am**  
**Secretary of State**

02-21-2006 90026 044 \*\*\*\*61.25

<b>DOCUMENT # N02000002089</b> 1. Entity Name <b>PUNTA GORDA SOCCER CLUB, INC.</b>					
Principal Place of Business <b>315 E OLYMPIA AVE STE 111 PUNTA GORDA, FL 33950</b>				Mailing Address <b>315 E OLYMPIA AVE STE 111 PUNTA GORDA, FL 33950</b>	
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
Country		Country		Country	
4. FEI Number <b>01-0659036</b>				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>RIVERA, JUAN I 315 E OLYMPIA AVE STE 111 PUNTA GORDA, FL 33950</b>				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> Zip Code	
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D LARSEN, ROBERT S</b> <input checked="" type="checkbox"/> Delete <b>4560 DUNCAN ROAD PUNTA GORDA, FL 33982</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Secretary</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>Whitney H. Andrew</b> <b>7522 CHRISIA</b> <b>Punta Gorda, FL 33955</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D DELAO, ANGELA</b> <input checked="" type="checkbox"/> Delete <b>1880 SCOTCH PINE CT #121 PUNTA GORDA, FL 33950</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>Treasurer</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>Penny O'Donnell</b> <b>7441 Sweet Alyssum</b> <b>Punta Gorda, FL 33955</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D BELL, BETH</b> <input checked="" type="checkbox"/> Delete <b>720 PAMELA DR PUNTA GORDA, FL 33950</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VIC PRESIDENT</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>SERGE F. COSSA, MD</b> <b>4025 BASILIA COURT</b> <b>PUNTA GORDA, FL 33950</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D HART, LINDA</b> <input checked="" type="checkbox"/> Delete <b>800 BRODHAG ROAD PUNTA GORDA, FL 33950</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>PRESIDENT</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>ROBERT W. DWIER</b> <b>5655 REVERSIDE DR</b> <b>PUNTA GORDA, FL 33982</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
<b>SIGNATURE: Penny O'Donnell</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<b>2-16-06 941-637-8884</b> <small>Date Daytime Phone #</small>		