

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000004406

FILED
Mar 16, 2009
Secretary of State

Entity Name: CHARLOTTE COUNTY SOCCER FEDERATION, INC.

Current Principal Place of Business:

26068 SALONIKA LN
PUNTA GORDA, FL 33983 US

New Principal Place of Business:

Current Mailing Address:

26068 SALONIKA LN
PUNTA GORDA, FL 33983 US

New Mailing Address:

FEI Number: 74-3043455

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAHUSAC, PHILIP
26068 SALONIKA LANE
PUNTA GORDA, FL 33983 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CAHUSAC, PHILIP
Address: 26068 SALONIKA LANE
City-St-Zip: PUNTA GORDA, FL 33983 US

Title: D () Delete
Name: FABER, NORA
Address: 22088 BRONXVILLE AVE
City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: T () Delete
Name: YOUNG, JIM
Address: 89 MANIZAKS AVE
City-St-Zip: PUNTA GORDA, FL 33983 US

Title: VP () Delete
Name: COUTO, PAUL
Address: 17489 MARCEY AVE
City-St-Zip: PORT CHARLOTTE, FL 33948 US

Title: S () Delete
Name: MCBEE, SELDA
Address: 4178 LIBRARY ST
City-St-Zip: PORT CHARLOTTE, FL 33948 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: MUNIZ, KORY
Address: 2055 PECAN ST
City-St-Zip: NORTH PORT, FL 34287 US

Title: T (X) Change () Addition
Name: FABER, NORA
Address: 22088 BRONXVILLE AVE
City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: VP (X) Change () Addition
Name: LEACH, DENNIS
Address: 3183 EASY ST
City-St-Zip: PORT CHARLOTTE, FL 33952 US

Title: S (X) Change () Addition
Name: BROWN, STACEY
Address: 1352 SAN CRISTOBAL AVE B3
City-St-Zip: PUNTA GORDA, FL 33983 US

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: PHILIP CAHUSAC

P

03/16/2009

Electronic Signature of Signing Officer or Director

Date