

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005076

FILED
Feb 14, 2006
Secretary of State

Entity Name: NATURE COAST SOCCER LEAGUE, INC.

Current Principal Place of Business:

11441 CAMP DRIVE
DUNNELLON, FL 34432

New Principal Place of Business:

PO BOX 455
HOLDER, FL 344445

Current Mailing Address:

PO BOX 455
HOLDER, FL 344445

New Mailing Address:

FEI Number: 20-0152142

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

POST, WILLIAM A ESQ
20702 W PENNSYLVANIA AVE
DUNNELLON, FL 34431 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: D () Delete
Name: FAGAN, KEVIN
Address: 11441 CAMP DRIVE
City-St-Zip: DUNNELLON, FL 34432

Title: D () Delete
Name: FAGAN, NANCY
Address: 11441 CAMP DRIVE
City-St-Zip: DUNNELLON, FL 34432

Title: D () Delete
Name: HOWARD, ARLENE
Address: 5209 N RED RIBBON PT
City-St-Zip: BEVERLY HILLS, FL 34465

Title: D () Delete
Name: DEEM, MICHAEL
Address: 5572 N TWINKLE PT
City-St-Zip: BEVERLY HILLS, FL 34465

Title: D () Delete
Name: GRYBKO, DARCY
Address: 10131 N COUNTRY CLUB WAY
City-St-Zip: CITRUS SPRINGS, FL 34434

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: FAGAN, KEVIN D
Address: 11441 CAMP DRIVE
City-St-Zip: DUNNELLON, FL 34432

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

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: DARCY GRYBKO

D

02/14/2006

Electronic Signature of Signing Officer or Director

Date