

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 02, 2006 8:00 am
Secretary of State

02-02-2006 90075 042 ****70.00

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1. Entity Name

**NATIONAL INTERCOLLEGIATE SOCCER OFFICIALS
ASSOCIATION FOUNDATION FUND, INC.**



Principal Place of Business

**541 WOODVIEW DRIVE
LONGWOOD FL 32779-2614**

Mailing Address

**541 WOODVIEW DRIVE
LONGWOOD FL 32779-2614**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

20-0622487

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**



6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**GALLUZZO, JOHN D ESQ.
6500 SOUTH HIGHWAY 17-92
FERN PARK FL 32730**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **BERNABEI, RAYMOND**
STREET ADDRESS **541 WOODVIEW DRIVE**
CITY - ST - ZIP **LONGWOOD FL 32779-2614**

TITLE **D** ☐ Delete
NAME **VAN DE VAARST, JOHN**
STREET ADDRESS **7760 BLUEBERRY HILL LANE**
CITY - ST - ZIP **ELLICOTT CITY MD 21043**

TITLE **D** ☐ Delete
NAME **ANDRES, KEN**
STREET ADDRESS **264 KINGS HIGHWAY EAST**
CITY - ST - ZIP **HADDONFIELD NY 08033**

TITLE **D** ☐ Delete
NAME **DORSEY, LARRY**
STREET ADDRESS **1544 KLAMATH DRIVE**
CITY - ST - ZIP **SUNNYDALE CA 94087-4144**

TITLE **D** ☐ Delete
NAME **DONNANGELO, MARIO**
STREET ADDRESS **1419 MORAVIA STREET**
CITY - ST - ZIP **BETHLEHEM PA 18015**

TITLE **D** ☒ Delete
NAME **ALLEN, MIKE**
STREET ADDRESS **4774 N.W. KIWANDA DRIVE**
CITY - ST - ZIP **PORTLAND OR 97229**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ Change ☒ Addition
NAME **D Joseph Miller**
STREET ADDRESS **1001 NORTH COLONY Rd**
CITY - ST - ZIP **Meriden, CT. 06450**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

SIGNATURE: Raymond Bernabei (RAYMOND BERNABEI)

1/24/06