


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2007 8:00 am
Secretary of State

01-16-2007 90260 006 ****61.25

DOCUMENT # N04000003246 1. Entity Name THE FUTBOL CLUB OF TAMPA, INC.			
Principal Place of Business 10519 BRENTFORD DRIVE TAMPA, FL 33626		Mailing Address 10519 BRENTFORD DRIVE TAMPA, FL 33626	
2. Principal Place of Business - No P.O. Box # 3802 Ehrlich Rd		3. Mailing Address 3802 Ehrlich Rd	
Suite, Apt. #, etc. Suite 201		Suite, Apt. #, etc. Suite 201	
City & State Tampa FL		City & State Tampa FL	
Zip 33624		Zip 33624	
Country Hillsborough		Country Hillsborough	
4. FEI Number 20-2754365		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent BLATTLER, ED 101 E. KENNEDY BOULEVARD 3802 EHRLICH RD, STE 201 TAMPA, FL 33624		7. Name and Address of New Registered Agent Name Ed Blattler Street Address (P.O. Box Number is Not Acceptable) 3802 Ehrlich Rd Suite 201 City Tampa FL Zip Code 33624	
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 Ed Blattler Ed Blattler, Registered Agent 1-4-07 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when registering) DATE</small>			
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	D CASTRO, JULIO E III 1202 BREWSTER DRIVE TAMPA, FL 33626	TITLE	DAVID DUDASH 7417 OAKVISTA CIRCLE TAMPA FL 33634
	<input checked="" type="checkbox"/> Delete		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE	D HOUSEMAN, DENNIS J 18507 BITTERN AVENUE LUTZ, FL 33553	TITLE	
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	DT VAN STEEN BERGEN, PAUL 16208 MARSHFIELD DRIVE TAMPA, FL 33624	TITLE	
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	DP FERRARA, ROGER 10519 BRENTFORD DRIVE TAMPA, FL 33626	TITLE	
	<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	DS ENTERIEIN, JAMES 10519 BRENTFORD DRIVE TAMPA, FL 33626	TITLE	ENTERLIEN, JAMES
	<input type="checkbox"/> Delete		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D FERRARA, SHEILA 10519 BRENTFORD DRIVE TAMPA, FL 33626	TITLE	
	<input type="checkbox"/> Delete		<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.			
SIGNATURE: PAUL VAN STEENBERGEN <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		Date 1/8/07 Daytime Phone # 813-727-3159	