

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000010199

FILED
Apr 27, 2007
Secretary of State

Entity Name: POWER SOCCER TAMPA, INC.

Current Principal Place of Business:

7853 GUNN HWY., SUITE 340
TAMPA, FL 33626

New Principal Place of Business:

Current Mailing Address:

7853 GUNN HWY., SUITE 340
TAMPA, FL 33626

New Mailing Address:

FEI Number: 58-2684615

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAVARRO, ELIO MANUEL
7853 GUNN HWY., SUITE 340
TAMPA, FL 33626 US

Name and Address of New Registered Agent:

GORMAN, DEBORAH
7853 GUNN HWY., SUITE 340
TAMPA, FL 33626 US

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: DEBORAH GORMAN

04/27/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: NAVARRO, ELIO M
Address: 7853 GUNN HWY., SUITE 340
City-St-Zip: TAMPA, FL 33626

Title: D () Delete
Name: HALL, TARA
Address: 4804 77TH ST. EAST
City-St-Zip: BRADENTON, FL 34203

Title: D () Delete
Name: NAVARRO, JESSICA M
Address: 7853 GUNN HWY., SUITE 340
City-St-Zip: TAMPA, FL 33626

Title: D () Delete
Name: FARBER, CAROL
Address: 4804 77TH STREET EAST
City-St-Zip: BRADENTON, FL 34203

Title: D (X) Delete
Name: COTON, JAMIE
Address: 2904 WEST IDLEWILD AVENUE
City-St-Zip: TAMPA, FL 33614

Title: D (X) Delete
Name: GORMAN, DEBORAH
Address: 2376 MADRID AVENUE
City-St-Zip: SAFETY HARBOR, FL 34695

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GORMAN, DEBORAH
Address: 7853 GUNN HWY., SUITE 340
City-St-Zip: TAMPA, FL 33626

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

Title: D (X) Change () Addition
Name: COTON, JAMIE
Address: 2904 WEST IDLEWILD AVENUE
City-St-Zip: TAMPA, FL 33614

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 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: DEBORAH GORMAN

D

04/27/2007

Electronic Signature of Signing Officer or Director

Date