

2008 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT # N07000001-799 1. Entity Name GLOBAL UNITED SOCCER, INC.				 FILED 09 MAR 31 PM 3:46	
Principal Place of Business 226 W. BUSCH BLVD VALRICO, FL 33594		Mailing Address 226 W. BUSCH BLVD VALRICO, FL 33594		SECRETARY STATE 300143390943 02/11/09--01029--006 **61.25 ✓ REINSTATEMENT 08-09	
2. Principal Place of Business - No P.O. Box # 225 W. Busch Blvd Suite, Apt. #, etc.		3. Mailing Address DR. DAYILA 410 SPRINGFIELD College Suite, Apt. #, etc. 225 W. Busch Blvd.		REINSTATEMENT 08-09 04/02/09--01038--009 **61.25 ✓	
City & State TAMPA, FL		City & State TAMPA, FL			
Zip 33612	Country	Zip 33612	Country		
4. FEI Number 06-1814679				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				REINSTATEMENT 08-09 04/02/09--01038--009 **61.25 ✓	
6. Name and Address of Current Registered Agent GROSS, MICHAEL J ESQ. 31 - 54TH STREET NORTH ST. PETERSBURG, FL 33710					
7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code				REINSTATEMENT 08-09 04/02/09--01038--009 **61.25 ✓	
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 After January 1, 2009, Fee will be \$122.50		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DAVILA, RICHARD 1609 CARTER OAK DRIVE VALRICO, FL 33594 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ADAMS, THEODORE J. 4703 BARNSTEAD DRIVE RIVERVIEW, FL 33578 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FERROL, LARRY E 2341 LORENA LANE CLEARWATER, FL 33765 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S TAYLOR, CAROL 4438 E. TARPON DRIVE TAMPA, FL 33617 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ISAJAR, SAMUEL 627 HOLLAND AVE. TAMPA, FL 33617 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JEAN FRANCOIS, EMMANUEL 8700 N. 50TH STREET, APT. 227 TAMPA, FL 33617 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GROSS, MICHAEL J ESQ. 31 - 54TH STREET NORTH ST. PETERSBURG, FL 33710 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JONES, JONATHON 10220 DOUGLAS OAK CIRCLE, APT. 302 TAMPA, FL 33610 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MILLER, NORENE COPELAND 1911 E. CHELSEA STREET TAMPA, FL 33610 ☐ Change ☒ Addition		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		3-27-09 Date		813-936-2800 Daytime Phone #	