

2009 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N08000003745

FILED
Oct 10, 2009
Secretary of State

Entity Name: DAVIE UNITED SOCCER CLUB, INC.

Current Principal Place of Business:

9715 NW 19TH PLACE
SUNRISE, FL 33322 US

New Principal Place of Business:

11851 NW 24TH STREET
CORAL SPRINGS, FL 33065 US

Current Mailing Address:

9715 NW 19TH PLACE
SUNRISE, FL 33322 US

New Mailing Address:

11851 NW 24TH STREET
CORAL SPRINGS, FL 33065 US

FEI Number: 26-2425276 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

QUILES, LISA
9715 NW 19TH PLACE
SUNRISE, FL 33322 US

Name and Address of New Registered Agent:

QUILES, LISA
11851 NW 24TH STREET
CORAL SPRINGS, FL 33065 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: LISA QUILES

10/10/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P D () Delete
Name: ARMSTRONG, JAMES
Address: 7900 NOVA DR. SUITE 105
City-St-Zip: DAVIE, FL 33324 US

Title: S () Delete
Name: QUILES, LISA
Address: 9715 NW 19TH PLACE
City-St-Zip: SUNRISE, FL 33322 US

Title: V () Delete
Name: QUILES, GILBERT
Address: 9715 NW 19TH PLACE
City-St-Zip: SUNRISE, FL 33322 US

Title: T () Delete
Name: DEITCH, MICHELLE
Address: 505 SW 131ST TERRACE
City-St-Zip: DAVIE, FL 33325 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P D (X) Change () Addition
Name: ARMSTRONG, JAMES
Address: 1093 SHOTGUN ROAD
City-St-Zip: SUNRISE, FL 33326 US

Title: S (X) Change () Addition
Name: QUILES, LISA
Address: 11851 NW 24TH STREET
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: V (X) Change () Addition
Name: QUILES, GILBERT
Address: 11851 NW 24TH STREET
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: T (X) Change () Addition
Name: DEITCH, MICHELLE
Address: 2621 NW 105 LANE
City-St-Zip: SUNRISE, FL 33322 US

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: MICHELLE DEITCH

T

10/10/2009

Electronic Signature of Signing Officer or Director

Date