

2010 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Jan 29, 2010
Secretary of State

DOCUMENT# N08000004981

Entity Name: HERNANDO COUNTY ADULT SOCCER INC.**Current Principal Place of Business:**1360 ANDERSON SNOW RD.
SPRING HILL, FL 34609**New Principal Place of Business:****Current Mailing Address:**PO BOX 15335
BROOKSVILLE, FL 34609 US**New Mailing Address:****FEI Number:** 42-1762601**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**KRAFT, ALYSON
140 LARK AVE
BROOKSVILLE, FL 34601 US**Name and Address of New Registered Agent:**

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD
Name: KRAFT, ALYSON
Address: P. O. BOX 15335
City-St-Zip: BROOKSVILLE, FL 34604 US

Title: VD
Name: BROOKS, TOM
Address: P. O. BOX 15335
City-St-Zip: BROOKSVILLE, FL 34604 US

Title: T
Name: BROOKS, PEGGY
Address: P. O. BOX 15335
City-St-Zip: BROOKSVILLE, FL 34604 US

Title: S
Name: BEGENY, ERIN
Address: PO BOX 15335
City-St-Zip: BROOKSVILLE, FL 34604 US

I hereby 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 all other like empowered.

SIGNATURE: ALYSON KRAFT

PD

01/29/2010

Electronic Signature of Signing Officer or Director

Date