

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08000005727

FILED  
Jan 13, 2009  
Secretary of State

**Entity Name:** JUVENTUS OF PORT SAINT LUCIE SOCCER CLUB, INC.

**Current Principal Place of Business:**

3084 SE PINE STREET  
PORT SAINT LUCIE, FL 34952

**New Principal Place of Business:**

3084 SE PINE VALLEY STREET  
PORT SAINT LUCIE, FL 34952

**Current Mailing Address:**

3084 SE PINE STREET  
PORT SAINT LUCIE, FL 34952

**New Mailing Address:**

3084 SE PINE VALLEY STREET  
PORT SAINT LUCIE, FL 34952

**FEI Number:** 90-0395818

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DI GIORGIO, GIOACCHINO  
3084 SE PINE STREET  
PORT SAINT LUCIE, FL 34952 US

**Name and Address of New Registered Agent:**

DI GIORGIO, GIOACCHINO  
3084 SE PINE VALLEY STREET  
PORT SAINT LUCIE, FL 34952 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:

01/13/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: OD ( ) Delete  
Name: DI GIORGIO, GIOACCHINO  
Address: 3084 SE PINE STREET  
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: OD ( ) Delete  
Name: VILLAR-PRUNEDDU, ROSANNE  
Address: 10593 SW WATERWAY LN  
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: OD ( ) Delete  
Name: DI GIORGIO, DOMINIC  
Address: 2241 SE BARRINGTON CT  
City-St-Zip: PORT SAINT LUCIE, FL 34952

Title: OD ( ) Delete  
Name: NICKELL, CRYSTALL  
Address: 2705 N INDIAN RIVER DR  
City-St-Zip: FORT PIERCE, FL 34946

Title: OD ( ) Delete  
Name: DI GIORGIO, ANTHONY  
Address: 2433 SE MELALEUCA BLVD  
City-St-Zip: PORT ST LUCIE, FL 34952

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: OD (X) Change ( ) Addition  
Name: DI GIORGIO, GIOACCHINO  
Address: 3084 SE PINE VALLEY STREET  
City-St-Zip: PORT SAINT LUCIE, FL 34952

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

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: GIOACCHINO DI GIORGIO

OD

01/13/2009

Electronic Signature of Signing Officer or Director

Date