## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11030

Entity Name: TITUSVILLE SOCCER CLUB, INC.

FILED Jan 03, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

PO BOX 683

TITUSVILLE, FL 32781

Current Mailing Address: New Mailing Address:

PO BOX 683

TITUSVILLE, FL 32781

FEI Number: 59-2846839 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

CONE, GEOFF

3305 LISA DRIVE

59 FAIRGLEN DR

MIMS EL 23764 LIS

TITLISVILLE EL 23706

MIMS, FL 32754 US TITUSVILLE, FL 32796 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: RICHARD HINCHMAN 01/03/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition

 Name:
 CONE, GEOFF
 Name:
 HINCHMAN, RICHARD

 Address:
 3305 LISA DRIVE
 Address:
 59 FAIRGLEN DR

 City-St-Zip:
 MIMS, FL 32754
 City-St-Zip:
 TITUSVILLE, FL 32796

Title: VPD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 BARRETTA, JOSEPH
 Name:

 Address:
 4575 HELENA DRIVE
 Address:

 City-St-Zip:
 TITUSVILLE, FL 32780
 City-St-Zip:

 Name:
 KATHLEEN, ROWAN
 Name:
 CONE, GEOFFREY

 Address:
 3707 SOUTH RIDGE CIRCLE
 Address:
 3305 LISA DR

 City-St-Zip:
 TITUSVILLE, FL 32796
 City-St-Zip:
 MIMS, FL 32754

I hereby certify that the information supplied with this filing does not qualify for the 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: RICHARD HINCHMAN PD 01/03/2006