2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

Feb 02, 2006 8:00 am Secretary of State DOCUMENT # N15224 1. Entity Name 02-02-2006 90076 020 ****61.25 COLUMBIA YOUTH SOCCER ASSOCIATION, INC. Principal Place of Business Mailing Address P.O. BOX 3138 LAKE CITY FL 32056-3138 910 SW BALL PARK GLEN LAKE CITY FL 32025 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 59-2883092 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JENKINS, T.D. RT 8 BOX 566 Street Address (P.O. Box Number is Not Acceptable) LAKE CITY FL 32055 Zip Code 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) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing **\$5.00** May Be Make Check Payable to Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE 2 Oelete TITLE Change Scott EVERETT ☐ Addition WINDERGREN, TODD 440 SW TULAROSA LANE NAME RT 13 BOX 595 STREET ADDRESS STREET ADDRESS LAKE City, FL 32025 LAWTEY FL 32058 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Addition TILTON, JIM NAME NAME RT 328 BOX 22019 STREET ADORESS STREET ADDRESS CITY-ST-ZIP LAKE CITY FL 32024 CITY-ST-7/P TITLE ☐ Delete ☐ Change ☐ Addition JENKINS, T.D. NAME RT 8 BOX 566 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKE CITY FL 32055 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition KAMBACK, DWIGHT NAME NAME STREET ADDRESS 620 SE EVERGREEN DRIVE STREET ADDRESS CATY-ST-ZIP LAKE CITY FL 32025 CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Addition NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP

FILED

if changed, or on an attachment with an address, with all other like empowered. DWIGHT KAMRACK TREASURE CYSA /2010

12. I hereby certify that the information supplied with this filing does not quality for the exemptions contained in Section 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