2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2009
Secretary of State

DOCUMENT# N15816

Entity Name: SOUTHSIDE YOUTH SOCCER LEAGUE, INC.

Current Principal Place of Business:

2001 COUNTRY CLUB WAY
ST. PETERSBURG, FL 33711

New Principal Place of Business:

Current Mailing Address:

4905 34TH ST. S.
#244
ST. PETERSBURG, FL 33711

New Mailing Address:

FEI Number: 59-2803965 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

D'ALESSANDRO, SUZANNE
1618 PINELLAS POINT DR SOUTH
SAINT PETERSBURG, FL 33712 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: D ( ) Delete
Name: BRIGHTBILL, PATRICIA
Address: 5900 9TH ST SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33707

Title: T ( ) Delete
Name: ALESSANDRO, SUZANNE
Address: 1618 PINELLAS POINT DR. SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33712

Title: P ( ) Delete
Name: EFFIOM, CLAUD
Address: 4760 NEPTUNE DRIVE
City-St-Zip: SAINT PETERSBURG, FL 33705

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: D ( ) Change (X) Addition
Name: CARTOLANO, JANET
Address: 4908 38TH WAY SOUTH
City-St-Zip: SAINT PETERSBURG, FL 33711

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: SUZANNE D'ALESSANDRO T 01/24/2009

Electronic Signature of Signing Officer or Director — Date