

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N18571 (2)

1. Corporation Name

CORAL SPRINGS SOCCER CLUB, INC.



Principal Place of Business

**9913 SW 1ST CT
CORAL SPRINGS FL 33071
US**

Mailing Address

**9913 SW 1ST CT
CORAL SPRINGS FL 33071
US**

3. Date Incorporated or Qualified
01/02/1987

3a. Date of Last Report
06/06/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number
59-2757221

Applied For
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**VANDERBECK, ROBERT S CPA,MBA
9913 S.W. 1ST COURT
CORAL SPRINGS FL 33071**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☒ DELETE
NAME **LAWSON, RALPH E**
STREET ADDRESS **5050 W LEITNER DR**
CITY-ST-ZIP **CORAL SPRINGS FL**

1.1 TITLE **PD** ☒ Change ☐ Addition
1.2 NAME **DAVID RODKIN**
1.3 STREET ADDRESS **10455 NW 4 ST**
1.4 CITY-ST-ZIP **CORAL SPRINGS FL 33071**

TITLE **VPD** ☒ DELETE
NAME **BURKHART, JEFFREY**
STREET ADDRESS **4461 NW 113TH TERR**
CITY-ST-ZIP **CORAL SPRINGS FL**

2.1 TITLE **VPD** ☒ Change ☐ Addition
2.2 NAME **BILL COFFMAN**
2.3 STREET ADDRESS **170 NW 112LN**
2.4 CITY-ST-ZIP **CORAL SPRINGS FL 33071**

TITLE **TD** ☐ DELETE
NAME **BLANZ, KAREN B**
STREET ADDRESS **6344 NW 50TH ST**
CITY-ST-ZIP **CORAL SPRINGS FL**

3.1 TITLE **SD** ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE **SD** ☒ DELETE
NAME **TOOMY, DENISE M**
STREET ADDRESS **7701 NEWPORT LANE**
CITY-ST-ZIP **PARKLAND FL**

4.1 TITLE **TD** ☒ Change ☐ Addition
4.2 NAME **DAVID R. MCMURRAY**
4.3 STREET ADDRESS **5575 NW 60 DR**
4.4 CITY-ST-ZIP **CORAL SPRINGS FL 33067**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE **VPD** ☐ Change ☒ Addition
5.2 NAME **ROY ARIGO**
5.3 STREET ADDRESS **8351 NW 5 ST**
5.4 CITY-ST-ZIP **CORAL SPRINGS FL 33071**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: X *David R. McMurray* **DAVID R. MCMURRAY** **X**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/28/96 **29547338872**

Date

Daytime Phone #

CR2E037 (12/95)