

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N18571

1. Entity Name

CORAL SPRINGS SOCCER CLUB, INC.

FILED
Mar 07, 2000 8:00 am
Secretary of State

03-07-2000 90053 033 ****61.25

Principal Place of Business

9913 SW 1ST CT
CORAL SPRINGS FL 33071
US

Mailing Address

9913 SW 1ST CT
CORAL SPRINGS FL 33071-7344
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-2757221

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

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

Name

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

City

FL

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:
FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
THOR, TIM
8710 NW 21ST CT.
CORAL SPRINGS FL 33071 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
HOWELL, JAN
239 NW 93 AVENUE
CORAL SPRINGS, FL 33071 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
WINSLOW, KELLY
5451 PINETREE RD.
CORAL SPRINGS FL 33067 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP D
MATTEI, SAL
9797 RIVERSIDE DR
CORAL SPRINGS, FL 33071 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
WINSLOW, SUDREY
5451 PINETREE RD
CORAL SPRINGS FL 33067 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VP D
DUNAYGA, DENNIS
6245 NW 104 WAY
PARKLAND, FL 33076 ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D
HECHT, LOU
9678 N SPRINGS WAY
CORAL SPRINGS FL 33076 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
D, P ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X *[Signature]* JAN HOWELL
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)