2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19049

FILED Jul 11, 2005 Secretary of State

Entity Name: CAPITAL SOCCER ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 146 TEAL LANE TALLAHASSEE, FL 32308 **Current Mailing Address: New Mailing Address:** P.O. BOX 10813 TALLAHASSEE, FL 323022813 FEI Number: 59-2809388 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Name and Address of Current Registered Agent: Name and Address of New Registered Agent: OHLSEN, MICHAEL 146 TEAL LANE TALLAHASSEE, FL 32308 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: (X) Change () Addition () Delete JOHNSON, SEAN OHLSEN, MICHAEL Name: Name: 3216 N SHANNON LAKES Address: 146 TEAL LANE Address: City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip: TALLAHASSEE, FL 32308 US Title: Title: (X) Change () Addition () Delete Name: ALBERS, KARI Name: LIPMAN, ERIC Address: 2444 NEEDLE PALM WAY Address: 3330 THOMAS BUTLER ROAD City-St-Zip: TALLAHASSEE, FL 32309 City-St-Zip: TALLAHASSEE, FL 32308 US Title: () Delete Title: (X) Change () Addition OHLSEN, MICHAEL OHLSEN, MICHAEL Name: Name: 146 TEAL LANE Address: 146 TEAL LANE Address: City-St-Zip: TALLAHASSEE, FL 32308 City-St-Zip: TALLAHASSEE, FL 32308 US Title: () Delete Title: (X) Change () Addition Name: MARSHALL, BRIGETTE H. Name: KOCH, KRISTA 6839 CHISHOLM COURT E Address: 6703 PEMONA CT Address: City-St-Zip: TALLAHASSEE, FL 32311 City-St-Zip: TALLAHASSEE, FL 32311 US Title: () Delete Title: () Change (X) Addition ASHBY, VERNICE Name: Name: 226 NARR ROAD Address: Address: City-St-Zip: City-St-Zip: TALLAHASSEE, FL 32317 US Title: () Delete Title: () Change (X) Addition SQUIRE, YASHICA Name: Name: Address: Address: 2651 BALDWIN DRIVE S TALLAHASSEE, FL 32309 US City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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: MICHAEL OHLSEN P 07/11/2005