

2007 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED

2007 OCT 11 PM 3:11

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N24009

1. Entity Name
ORANGE COUNTY SOCCER CLUB, INC.



Principal Place of Business
7600 SOUTHLAND BLVD
SUITE 103
ORLANDO, FL 32809 US

Mailing Address
PO BOX 691537
ORLANDO, FL 32869-1537 US



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

7600 Southland Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Ste 103

City & State

Orlando FL

Zip

Country

Zip

Country

32809

Orange

09282007 REIN-NP

CR2E099 (1/07)

4. FEI Number
59-2867660

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

AYER, STEVE C
14306 LE CHALE DRIVE
ORLANDO, FL 32837

7. Name and Address of New Registered Agent

Name Steve C. Ayer
Street Address (P.O. Box Number is Not Acceptable)
522 Interlude Lane
City Orlando FL Zip Code 32824

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 Steve Ayer Steve Ayer Treasurer 9/28/07
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$236.25
After January 1, 2008, Fee will be \$297.50

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> Delete
NAME	NOLAN, STEVEN M	
STREET ADDRESS	409 LYTTON CIRCLE	
CITY-ST-ZIP	ORLANDO, FL 32824	
TITLE	TD	<input type="checkbox"/> Delete
NAME	AYER, STEVE C	
STREET ADDRESS	14306 LECHALE DR	
CITY-ST-ZIP	ORLANDO, FL 32837	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	PERDY, ALBERT	
STREET ADDRESS	2628 HERON LANDING CT	
CITY-ST-ZIP	ORLANDO, FL 32837	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	200110698692	
STREET ADDRESS	10/11/07--01047--009 **245.00	
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Steve Ayer Steve Ayer 9/28/07 407-466-9242
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #