## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N29489

FILED May 22, 2009 Secretary of State

Entity Name: PLAYGROUND AREA SOCCER ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

P.O. BOX 921 30 MEIGS DR

SHALIMAR, FL 32579 SHALIMAR, FL 32579

Current Mailing Address: New Mailing Address:

P.O. BOX 921

SHALIMAR, FL 32579

FEI Number: 59-2146670 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:

TALBOT, IAN DOUGLAS, JOSHUA
30 MEIGS DRIVE 731 EAST SUNSET BLVD

SHALIMAR, FL 32579 US FORT WALTON BEACH, FL 32547 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: JOSHUA DOUGLAS 05/22/2009

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 TALBOT, IAN
 Name:
 TALBOT, IAN

 Address:
 30 MAIGS DRIVE
 Address:
 30 MEIGS DRIVE

 City-St-Zip:
 SHALIMAR, FL 32579
 City-St-Zip:
 SHALIMAR, FL 32579

Title: VPD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 MORRELL, RON
 Name:

 Address:
 22 NORTH DRIVE
 Address:

 City-St-Zip:
 SHALIMAR, FL 32579
 City-St-Zip:

Title: TD () Delete Title: () Change () Addition

 Name:
 SUFNAR, DEE
 Name:

 Address:
 42 CHELSEA DRIVE
 Address:

 City-St-Zip:
 FORT WALTON BEACH, FL 32547
 City-St-Zip:

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: JOSH DOUGLAS MR 05/22/2009