

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N34175

FILED
Apr 29, 2007
Secretary of State

Entity Name: FLORIDA WEST COAST COLLEGIATE SOCCER OFFICIALS ASSOCIATION, INC.

Current Principal Place of Business:

6606 REEF CIRCLE
TAMPA, FL 33625 US

New Principal Place of Business:

3504 HOLLOW OAK PLACE
BRANDON, FL 33611 US

Current Mailing Address:

6606 REEF CIRCLE
TAMPA, FL 33625 US

New Mailing Address:

3504 HOLLOW OAK PLACE
BRANDON, FL 33611 US

FEI Number: 59-2988491

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

MEKELBURG, SR, MICHAEL J
6606 REEF CIRCLE
TAMPA, FL 33625 US

Name and Address of New Registered Agent:

HOPKINS, SCOTT
3504 HOLLOW OAK PLACE
BRANDON, FL 33611 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: SCOTT HOPKINS

04/29/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: WARHOLA, MARK
Address: 5317 NORTHDAL BLVD
City-St-Zip: TAMPA, FL 33624

Title: STD () Delete
Name: MEKELBURG, SR, MICHAEL J
Address: 6606 REEF CIRCLE
City-St-Zip: TAMPA, FL 33625

Title: D () Delete
Name: HOPKINS, SCOTT
Address: 8205 QUAIL RUN DRIVE
City-St-Zip: TAMPA, FL 33618

Title: VD () Delete
Name: VARS, JAMES
Address: 4723 LAWN AVENUE
City-St-Zip: TAMPA, FL 33611

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: CHERRY, BRIAN
Address: 8518 POYDRAS LANE
City-St-Zip: TAMPA, FL 33635

Title: STD (X) Change () Addition
Name: HOPKINS, SCOTT
Address: 3504 HOLLOW OAK PLACE
City-St-Zip: BRANDON, FL 33611

Title: D (X) Change () Addition
Name: ROGERS, BOBBY
Address: 614 LAKEMONT DR
City-St-Zip: BRANDON, FL 33510

Title: VD (X) Change () Addition
Name: THOMPSON, PHIL
Address: P.O. BOX 6751
City-St-Zip: BRANDON, FL 33508

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: SCOTT HOPKINS

STD

04/29/2007

Electronic Signature of Signing Officer or Director

Date