

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 22, 1999 8:00 am  
Secretary of State

04-22-1999 90076 017 \*\*\*\*61.25

DOCUMENT # N35572

1. Corporation Name

ORLANDO UNITED SOCCER CLUB, INC.

Principal Place of Business

P.O. BOX 568261  
ORLANDO FL 32856-8261

Mailing Address

P.O. BOX 568261  
ORLANDO FL 32856-8261



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

12/06/1989

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

59-2999448

Applied For

Not Applicable

22

27

City & State

City & State

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

23

28

Zip Country

Zip Country

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

24

29

Country

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LANG, THOMAS F.  
390 N. ORANGE AVE.  
SUITE 1300  
ORLANDO FL 32801

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VD  
ORCHILLES, JORGE  
PO BOX 1650 N/A  
WINTER GARDEN FL

DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

Change Addition

WINDERHIRE FL 34786

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
S  
SHUMAN, GEORGE  
3416 GATLIN PL CIR  
ORLANDO FL

DELETE

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
T  
MORRIS, LINDA  
8518 SHADY GLEN DR  
ORLANDO FL

DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
PD  
HUNTER, JEFF  
1030 LENMORE COURT  
ORLANDO FL

DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

Change Addition

2523 MADRON CT.  
ORLANDO FL 32806

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
MEYER, MARY  
7241 WILLOWOOD ST  
ORLANDO FL

DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

Change Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

Change Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Jorge A. Orchilles, JORGE L. ORCHILLES 3/5/99 (407) 656-2778

CR2E037-(11/98)