

**2004 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N48546

**FILED**  
**Nov 10, 2004**  
**Secretary of State****Entity Name:** MELBOURNE BEACH SOCCER CLUB, INC.**Current Principal Place of Business:**P.O. BOX 511012  
MELBOURNE BEACH, FL 32951**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 511012  
MELBOURNE BEACH, FL 32951**New Mailing Address:****FEI Number:** 59-2433084**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**NELSON, MARC  
414 MAGNOLIA AVE  
MELBOURNE BEACH, FL 32951 US**Name and Address of New Registered Agent:**WILLIAMMEE, JULIE  
411 NIKOMAS WAY  
MELBOURNE BEACH, FL 32951 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: JULIE WILLIAMMEE

11/10/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PVD ( ) Delete  
Name: LINDENBERG, KENT  
Address: 2016 SOUTH RIVER RD  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: TSD ( ) Delete  
Name: NELSON, MARC  
Address: 414 MAGNOLIA AVE  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: D ( ) Delete  
Name: KNOWLTON, KAREN  
Address: 207 SUNSET BLVD  
City-St-Zip: MELBOURNE BEACH, FL 32951

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PVD (X) Change ( ) Addition  
Name: JOHNSON, DEKE  
Address: 205 FLAMINGO LANE  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: TSD (X) Change ( ) Addition  
Name: WILLIAMMEE, JULIE  
Address: 411 NIKOMAS WAY  
City-St-Zip: MELBOURNE BEACH, FL 32951

Title: D (X) Change ( ) Addition  
Name: SCULTHROP, GRETCHEN  
Address: 5555 SOUTH HIGHWAY A1A  
City-St-Zip: MELBOURNE BEACH, FL 32951

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: JULIE WILLIAMMEE

TSD

11/10/2004

Electronic Signature of Signing Officer or Director

Date