2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N50226

FILED Apr 26, 2006 Secretary of State

Entity Name: SOUTH HILLSBOROUGH SOCCER, INC.

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

P.O. BOX 3689 P.O. BOX 2580

APOLLO BEACH, FL 335721006 RIVERVIEW, FL 335682580

Current Mailing Address: New Mailing Address:

P.O. BOX 3689 P.O. BOX 2580

APOLLO BEACH, FL 335721006 RIVERVIEW, FL 335682580

FEI Number: 59-3132620 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ZAJAC, TROY

13009 PRESTWICK DR
RIVERVIEW, FL 33569 US

BRUCE, ROBERT G
9223 SUNNYOAK DR.
RIVERVIEW, FL 33569 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: ROBERT G. BRUCE 04/26/2006

Electronic Signature of Registered Agent Date

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

itle: DT () Delete Title: TRES (X) Change () Addition

 Name:
 GRAHAM, GEORGINA
 Name:
 FILIPEK, GARY

 Address:
 10414 HARVESTIME PL
 Address:
 10136 TARRAGON DRIVE

 City-St-Zip:
 RIVERVIEW, FL 33569
 City-St-Zip:
 RIVERVIEW, FL 33569

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

Name: SCOTT, WAYNE Name: ADAMS, MIKE

 Address:
 12804 YARN PL
 Address:
 10415 SEDGEBROOK DRIVE

 City-St-Zip:
 RIVERVIEW, FL 33569
 City-St-Zip:
 RIVERVIEW, FL 33569

Title: SEC () Change (X) Addition

 Name:
 Name:
 CHRISTENSON, MELISSA

 Address:
 Address:
 12112 FRUITWOOD DRIVE

 City-St-Zip:
 City-St-Zip:
 RIVERVIEW, FL 33569

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

 Name:
 Name:
 CASEY, DONNA

 Address:
 Address:
 15328 SWEAT LOOP ROAD

 City-St-Zip:
 City-St-Zip:
 WIMAUMA, FL 33598

 Name:
 Name:
 BRUCE, ROBERT G

 Address:
 Address:
 9223 SUNNYOAK DR.

 City-St-Zip:
 City-St-Zip:
 RIVERVIEW, FL 33569

I hereby certify that the information supplied with this filing does not qualify for the 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: ROBERT G. BRUCE PRES 04/26/2006