## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N9200000114

FILED Jan 07, 2007 Secretary of State

Entity Name: SEBASTIAN AREA SOCCER ASSOCIATION, INC.

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

714 W. FISCHER CIRCLE SEBASTIAN, FL 32958 US

Current Mailing Address: New Mailing Address:

P.O. BOX 780742

SEBASTIAN, FL 32978 US

FEI Number: 65-0372055 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:

RICHTER, CORY S 714 W. FISCHER CIRCLE SEBASTAIN, FL 32958 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:

Clastrania Ciarachura of Danistana d'Anant

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP ( ) Delete Title: DP (X) Change ( ) Addition Name: RIVIEZZO, PAT Name: RIVIEZZO, PAT

 Name:
 RIVIEZZO, PAT
 Name:
 RIVIEZZO, PAT

 Address:
 1074 COLE TERRACE
 Address:
 7880 92ND AVENUE

 City-St-Zip:
 SEBASTIAN, FL 32958
 City-St-Zip:
 VERO BEACH, FL 32967

Title: DV ( ) Delete Title: ( ) Change ( ) Addition Name: HENDERSON, BION Name:

 Name:
 HENDERSON, BION
 Name:

 Address:
 8006 140 STREET
 Address:

 City-St-Zip:
 SEBASTIAN, FL 32958
 City-St-Zip:

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

Name:RICHTER, CORYName:RICHTER, CORYAddress:714 FISCHER CIRCLEAddress:714 W. FISCHER CIRCLECity-St-Zip:SEBASTIAN, FL 32958City-St-Zip:SEBASTIAN, FL 32958

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

 Name:
 HENDERSON, KAMMY
 Name:
 MAGRANE, JENNIFER

 Address:
 8006 140 STREET
 Address:
 7922 134TH STREET

 City-St-Zip:
 SEBASTAIN, FL 32958
 City-St-Zip:
 SEBASTAIN, FL 32958

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: CORY S. RICHTER T 01/07/2007