

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001785

FILED
Mar 31, 2007
Secretary of State

Entity Name: SEMINOLE SHOOTING STARS SOCCER ASSOCIATION, INC.

Current Principal Place of Business:

9100-113TH ST N
SEMINOLE, FL 33772 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 7917
SEMINOLE, FL 337757917 US

New Mailing Address:

FEI Number: 59-3178844

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GROFF, SHEILA
10118 63RD AVENUE NORTH
SEMINOLE, FL 33772 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: GROFF, SHEILA
Address: 10118 63RD AVENUE NORTH
City-St-Zip: SEMINOLE, FL 33772

Title: CD () Delete
Name: CROUCH, JC
Address: 5280 90TH TERRACE NORTH
City-St-Zip: PINELLAS PARK, FL 33782

Title: VD () Delete
Name: MICHAELS, JEFF
Address: 13097 LOIS AVE
City-St-Zip: SEMINOLE, FL 33776

Title: TD () Delete
Name: SETTLE, LISA
Address: 12994 88TH AVE N
City-St-Zip: SEMINOLE, FL 33776

Title: RD () Delete
Name: CROUCH, LINDA
Address: 5280 90TH TERRACE NORTH
City-St-Zip: PINELLAS PARK, FL 33782

Title: PD () Delete
Name: SETTLE, RUSS
Address: 12994 88TH AVENUE NORTH
City-St-Zip: SEMINOLE, FL 33776

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: RUSS SETTLE

PD

03/31/2007

Electronic Signature of Signing Officer or Director

Date