

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000313

FILED  
Jan 26, 2007  
Secretary of State

Entity Name: NEW TAMPA SOCCER ASSOCIATION, INC.

**Current Principal Place of Business:**

10420 GOLDENBROOK WAY  
TAMPA, FL 33647 US

**New Principal Place of Business:**

**Current Mailing Address:**

10420 GOLDENBROOK WAY  
TAMPA, FL 33647

**New Mailing Address:**

FEI Number: 59-3224768

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ALLEN, STEVEN C  
10420 GOLDENBROOK WAY  
TAMPA, FL 33647 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: PD ( ) Delete  
Name: O'CONNOR, DENNIS  
Address: 10206 GARDEN ALCOVE DR  
City-St-Zip: TAMPA, FL 33647

Title: SD ( ) Delete  
Name: HUNT, JEFF  
Address: 18120 COURTNEY BREEZE DR  
City-St-Zip: TAMPA, FL 33647

Title: TD ( ) Delete  
Name: ALLEN, STEVE  
Address: 10420 GOLDENBROOK WAY  
City-St-Zip: TAMPA, FL 33647 US

Title: VD ( ) Delete  
Name: BRAY, CARYN  
Address: 7203 WAREHAM DR  
City-St-Zip: TAMPA, FL 33647

**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  
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: STEVE ALLEN

TD

01/26/2007

Electronic Signature of Signing Officer or Director

Date