

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001543

FILED
Jan 07, 2009
Secretary of State

Entity Name: CORAL ESTATES SOCCER CLUB, INC.

Current Principal Place of Business:

9675 SW 106TH AVENUE
MIAMI, FL 33176

New Principal Place of Business:

Current Mailing Address:

9675 SW 106TH AVENUE
MIAMI, FL 33176

New Mailing Address:

FEI Number: 65-0473680

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CONFESORE, LOU
9675 SW 106TH AVENUE
MIAMI, FL 33176 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: D () Delete
Name: KATZ, MORRIS
Address: 1925 NE 207 STREET
City-St-Zip: MIAMI, FL 33179

Title: D () Delete
Name: RAMOS, BONIFACIO
Address: 9830 SW 4 TERRACE
City-St-Zip: MIAMI, FL 33174

Title: D () Delete
Name: ROBERTS, CAROLYN
Address: 20140 SW 324 ST
City-St-Zip: MIAMI, FL 33030

Title: D () Delete
Name: CONFESORE, LOUIS
Address: 9675 SW 106 AVE
City-St-Zip: MIAMI, FL 33176

Title: D () Delete
Name: BUSTILLO, DENNIS
Address: 3135 SW 26 ST
City-St-Zip: MIAMI, FL 33133

Title: D () Delete
Name: RUBIO, GASTON
Address: 10050 SW 12 TERR
City-St-Zip: MIAMI, FL 33174

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
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 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: LOU CONFESORE

DIR

01/07/2009

Electronic Signature of Signing Officer or Director

Date