

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000004313

FILED
Mar 27, 2007
Secretary of State

Entity Name: FUTBOL CLUB OF SANTA ROSA, INC.

Current Principal Place of Business:

3360 JOPPA DRIVE
PACE, FL 32571

New Principal Place of Business:

Current Mailing Address:

PO BOX 2238
PACE, FL 32571

New Mailing Address:

FEI Number: 59-3268255

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SAVILLE, ROBERT T
4012 SCOTTSDALE AVE
PACE, FL 32571 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: PRES () Delete
Name: BRELAND, ROBERT
Address: 3350 SILKWOOD LN
City-St-Zip: PACE, FL 32571 US

Title: VP () Delete
Name: CZERWIEN, ARTHUR
Address: 5519 JOGGERS LN
City-St-Zip: PACE, FL 32571 US

Title: VP (X) Delete
Name: NAVARRO, JOSE
Address: 5032 ROLAND RD
City-St-Zip: PACE, FL 32571 US

Title: SEC () Delete
Name: GONZALES, THERESA
Address: 5818 WOODDUCK DRIVE
City-St-Zip: PACE, FL 32571 US

Title: TRES () Delete
Name: SAVILLE, ROBERT T
Address: 4012 SCOTTSDALE AVE
City-St-Zip: PACE, FL 32571 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: DWIGGINS, TOM
Address: 4956 FOREST CREEK DRIVE
City-St-Zip: PACE, FL 32571 US

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: ROBERT T SAVILLE

TRES

03/27/2007

Electronic Signature of Signing Officer or Director

Date