

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 19 1998 8:00am
Secretary of State

DOCUMENT # **N94000005068 (1)**

1. Corporation Name

CONCORD YOUTH SOCCER ASSOCIATION, INC.



Principal Place of Business

Mailing Address

**711 CATTLEMENT RD
SARASOTA FL 34232
US**

**PO BOX 49551
SARASOTA FL 34230
US**

3. Date Incorporated or Qualified

10/11/1994

4. FEI Number

65-0525610

Applied For

Not Applicable

2. Principal Place of Business

21 828 Idlewood Way

2a. Mailing Address

26 Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

23 Sarasota, FL

Suite, Apt. #, etc.

27 City & State

28

24 Zip

34242

Country

25 Sarasota

Zip

29

Country

30

6. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**REGAN, DONALD T
5127 WILLOW LEAF DRIVE
SUITE 755
SARASOTA FL 34241**

10. Name and Address of New Registered Agent

**81 Name DeLoach, Nancy L.
82 Street Address (P.O. Box Number is Not Acceptable)
4760 Meredith Lane
83
84 City Sarasota FL 85 Zip Code 34241**

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Nancy L. DeLoach

Nancy L. DeLoach, Treasurer

5/5/98

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE
NAME REGAN, DONALD T JR
STREET ADDRESS 5127 WILLOW LEAF DRIVE
CITY-ST-ZIP SARASOTA FL

TITLE VPD ☒ DELETE
NAME ST. JOHN, PHILIP
STREET ADDRESS 5488 DOMINICA CIRCLE
CITY-ST-ZIP SARASOTA FL

TITLE SD ☐ DELETE
NAME DELOACH, NANCY L
STREET ADDRESS 4760 MEREDITH LANE
CITY-ST-ZIP SARASOTA FL

TITLE TD ☒ DELETE
NAME VEILLION, NANCY L
STREET ADDRESS 11205 PARKSIDE PLACE
CITY-ST-ZIP BRADENTON FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President PD ☐ Change ☒ Addition
1.2 NAME Clark, Charles P.
1.3 STREET ADDRESS 828 Idlewood Way
1.4 CITY-ST-ZIP Sarasota, FL 34242

2.1 TITLE Vice President VPD ☐ Change ☒ Addition
2.2 NAME DeLoach, Wayne T.
2.3 STREET ADDRESS 4760 Meredith Lane
2.4 CITY-ST-ZIP Sarasota, FL 34241

3.1 TITLE TD ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE SD ☐ Change ☒ Addition
4.2 NAME Ackroyd, Jeffrey R.
4.3 STREET ADDRESS 316 Burlew Avenue
4.4 CITY-ST-ZIP Sarasota, FL 34232

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

5-5-98 (441) 954-4882

CFR2E037 (10/97)