## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N95000003993

FILED Apr 25, 2005 Secretary of State

Entity Name: BROOKSVILLE UNITED SOCCER ASSOCIATION, INC.

Current Pi	rincipal Place	of Business:	New Prince	New Principal Place of Business:		
720 PONCE DE LEON BLVD. BROOKSVILLE, FL 34601				19494 CORTEZ BLVD BROOKSVILLE, FL 34601		
Current Mailing Address:			New Maili	New Mailing Address:		
P.O. BOX 96 BROOKSVILLE, FL 346050096						
El Number:	59-3324382	FEI Number Applied For ( ) FEI N	umber Not App	plicable ( ) Certificate of Status Desired ( )		
Name and	Address of C	urrent Registered Agent:	Name and	d Address of New Registered Agent:		
STEINKAMP II, CARL T DDS 126 MOUNT FAIR AVE BROOKSVILLE, FL 34601 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both,						
n the State of Florida.						
SIGNATUF		a Signature of Degistered Agent		Doto		
SEELSEDS		c Signature of Registered Agent	ADDITION	Date		
OFFICERS AND DIRECTORS:			ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS:		
Γitle: Name: Address: City-St-Zip:	PD () STEINKAMP II, 0 126 MOUNT FAI BROOKSVILLE,	R AVE	Title: Name: Address: City-St-Zip:	()Change ()Addition		
Fitle: Name: Address: Dity-St-Zip:	VP () DEWEY, JIM 5415 NEFF LAK BROOKSVILLE,		Title: Name: Address: City-St-Zip:	()Change ()Addition		
Fitle: Name: Address: City-St-Zip:	TD () SHRADER, DAV 273 W. JEFFER BROOKSVILLE,	SON ST	Title: Name: Address: City-St-Zip:	() Change () Addition		
Fitle: Name: Address: Dity-St-Zip:	SD () STRATTON, JOH 8239 CRESAP S BROOKSVILLE,	ST	Title: Name: Address: City-St-Zip:	SD (X) Change ( ) Addition CRUM, FRED 20007 SUNCREST ROAD BROOKSVILLE, FL 34613		
Fitle: Name: Address: City-St-Zip:	CD () LEHMAN, RON 17141 BENES R BROOKSVILLE,		Title: Name: Address: City-St-Zip:	()Change ()Addition		
Fitle: Name: Address: City-St-Zip:	CD () BOWERS, ED 6042 HONEYSU BROOKSVILLE,		Title: Name: Address: City-St-Zip:	()Change ()Addition		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CARL T. STEINKAMP II PD 04/25/2005