2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004878

Entity Name: PARKLAND SOCCER CLUB, INC.

FILED Mar 28, 2009 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

6600 UNIVERSITY DRIVE 4613 UNIVERSITY DRIVE PARKLAND, FL 33067

284

PARKLAND, FL 33067

Current Mailing Address: New Mailing Address:

6600 UNIVERSITY DRIVE 4613 UNIVERSITY DRIVE PARKLAND, FL 33067 284

PARKLAND, FL 33067

FEI Number: 65-0358094 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

GADO, PETER M GADO, PETER M 6600 ÚNIVERSITY DRIVE 4613 UNIVERSITY DRIVE PARKLAND, FL 33067 284

PARKLAND, FL 33067 US

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: 03/28/2009

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete FERGUSON, SHANNON FERGUSON, SHANNON Name: Name: 6600 UNIVERSITY DR Address: 4613 UNIVERSITY DR, #284 Address: City-St-Zip: POMPANO BEACH, FL 33067 City-St-Zip: PARKLAND, FL 33067

Title: SD Title: (X) Change () Addition () Delete Name:

LANTIERI, SAL Name: LANTIERI, SAL Address: 5708 NW 57 Address:

4613 UNIVERSITY DR. #284 City-St-Zip: PARKLAND, FL 33067 City-St-Zip: PARKLAND, FL 33067

Title: TD () Delete Title: TD (X) Change () Addition GADO, PETER M GADO, PETER M Name: Name:

6600 UNIVERSITY DR 4613 UNIVERSITY DR, #284 Address: Address: City-St-Zip: POMPANO BEACH, FL 33067 City-St-Zip: PARKLAND, FL 33067

Title: DS () Delete Title: DS (X) Change () Addition

LANNAN, BILL LANNAN, BILL Name: Name:

4613 UNIVERSITY DR, #284 Address: 7490 NW 127 TERR Address: City-St-Zip: POMPANO BEACH, FL 33076 City-St-Zip: PARKLAND, FL 33076

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: PETER GADO TD 03/28/2009