


2006 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

FILED

2006 NOV - 6 AM 10:50
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N95000005087			
1. Entity Name LINCOLN BOYS SOCCER, INC.			
Principal Place of Business 3838 TROJAN TRAIL TALLAHASSEE, FL 32311 US		Mailing Address PO BOX 15133 TALLAHASSEE, FL 32317 US	
2. Principal Place of Business		3. Mailing Address 1109 WALDEN ROAD	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State TALLAHASSEE, FL	
Zip	Country	Zip	Country
		32317	USA
4. FEI Number 59-3368093		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
PENSON, ALBERT C 2810 REMINGTON GREEN CIR TALLAHASSEE, FL 32308		Name BETH WILLIAMS Street Address (P.O. Box Number is Not Acceptable) 1109 WALDEN ROAD City TALLAHASSEE FL Zip Code 32317	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE <u><i>Beth Williams</i></u>		DATE <u>10/29/2006</u>	
Signature, typed or printed name of registered agent and title if applicable.		(NOTE: Registered Agent signature required when reinstating)	
FILE NOW!!! FEE IS \$61.25 After January 1, 2007, Fee will be \$122.50		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PENSON, ALBERT C 4505 RANGEWOOD DRIVE TALLAHASSEE, FL 32309 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD VANGUILDER, MARY 6058 REDFIELD CIRCLE TALLAHASSEE, FL 32317 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD VANGUILDER, MARY 6058 REDFIELD CIRCLE TALLAHASSEE, FL 32317 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD WARNER, KEVIN 1538 AVONDALE WAY TALLAHASSEE, FL 32317 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WOOD, SALLY 556 MOSS VIEW WAY TALLAHASSEE, FL 32312 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WILLIAMS, BETH 1109 WALDEN ROAD TALLAHASSEE, FL 32317 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD TAFURI, NICK 3129 SHAMROCK STREET SOUTH TALLAHASSEE, FL 32309 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	500081554055 11/06/06--01045--004 ***61.25 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <u><i>Mary Van Guilder</i></u> MARY VAN GUILDER		DATE <u>10/29/2006</u> DAYTIME PHONE # <u>850-487-9401</u>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	