2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 28, 2003 8:00 am
Secretary of State
04-28-2003 91451 022 ****61.25

DOCUMENT # N95000005087

1. Entity Name
LINCOLN BOYS SOCCER, INC.

Principal Place of Business	Mailing Address
3838 TROJAN TRAIL TALLAHASSEE FL 32311 US	2320 FOXBORO WAY TALLAHASSEE FL 32308 US

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	P. O. Box 15133 Suite, Apt. #, etc.
City & State	Tallahassee, FL
Zip / Country	32317 / US

4. FEI Number 59-3368093 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$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 Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

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 STRAAB, TERRY 3513 CASTLEBEAR CIRCLE TALLAHASSEE FL 32308	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD Albert C. Penson 4505 Rangewood Drive Tallahassee, FL 32309	☐ Change ☒ Addition XX
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD DUNCAN, TOM 2320 FOXBORO WAY TALLAHASSEE FL 32308	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Debra Rivest P. O. Box 15133 Tallahassee, FL 32317	☐ Change ☒ Addition XX
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD DIETRICH, KAREN 4423 ARGYLE LANE TALLAHASSEE FL 32308	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD NEARHOOF, FRANK 1190 WALDEN ROAD TALLAHASSEE FL 32311	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD Louise Hudson 9485 Old St. Augustine Rd. Tallahassee, FL 32311	☐ Change ☐ Addition XX
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD Fred Becknell P. O. Box 15381 Tallahassee, FL 32317	☐ Change ☐ Addition XX
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (10/02)

12. 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 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: Debra Rivest DEBRA R. REST 4/24/03 656-5922