

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000001137

FILED
Apr 27, 2009
Secretary of State

Entity Name: PORT ORANGE SOCCER CLUB, INC.

Current Principal Place of Business:

%WILLIAM A CLARK
6088 SABAL BROOK WAY
PORT ORANGE, FL 32128 US

New Principal Place of Business:

6088 SABAL BROOK WAY
PORT ORANGE, FL 32128 US

Current Mailing Address:

%WILLIAM A CLARK
6088 SABAL BROOK WAY
PORT ORANGE, FL 32128 US

New Mailing Address:

6088 SABAL BROOK WAY
PORT ORANGE, FL 32128 US

FEI Number: 59-3499849

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BRIEN, JENNIFER
6088 SABAL BROOK WAY
PORT ORANGE, FL 32128 US

Name and Address of New Registered Agent:

TOBIN, CLAUDIA M TD
914 SANDLEWOOD DRIVE
PORT ORANGE, FL 32127 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: CLAUDIA TOBIN

04/27/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: BRIEN, JENNIFER
Address: 6088 SABAL BROOK WAY
City-St-Zip: PORT ORANGE, FL 32128

Title: VD () Delete
Name: MELLINGER, STEVE
Address: 5913 PARK RIDGE CIRCLE
City-St-Zip: PORT ORANGE, FL 32127

Title: SD () Delete
Name: BAUGHER, JOANN
Address: 808 BANBURY DRIVE
City-St-Zip: PORT ORANGE, FL 32129

Title: PD () Delete
Name: BRADLEY, BLAIS T
Address: POB DRAWER 290247
City-St-Zip: PORT ORANGE, FL 32128

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BRIEN, KEN
Address: 6088 SABAL BROOK WAY
City-St-Zip: PORT ORANGE, FL 32128

Title: VPD (X) Change () Addition
Name: ABADIA, EDSON
Address: 543 HAMLET DRIVE
City-St-Zip: PORT ORANGE, FL 32127

Title: TD (X) Change () Addition
Name: TOBIN, CLAUDIA
Address: 914 SANDLEWOOD DRIVE
City-St-Zip: PORT ORANGE, FL 32127

Title: SD (X) Change () Addition
Name: BAUGHER, JOANN
Address: 808 BANBURY DRIVE
City-St-Zip: PORT ORANGE, FL 32129

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: CLAUDIA TOBIN

TD

04/27/2009

Electronic Signature of Signing Officer or Director

Date