2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002980

Entity Name: WINTER SPRINGS SOCCER CLUB, INC.

FILED Apr 01, 2005 Secretary of State

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

8117 PARRIST DR 15 CHERRY LAUREL CT.

ORLANDO, FL 32825 US APT.105

WINTER SPRINGS, FL 32708 US

Current Mailing Address: New Mailing Address:

P.O. BOX 196178

WINTER SPRINGS, FL 32719 US

FEI Number: 59-3382788 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

NOCE, THOMAS DICKENS, KENNETH J 8117 PARROT DR 15 CHERRY LAUREL CT.

ORLANDO, FL 32825 US #105 WINTER SPRINGS, FL 32708 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: KENNETH J DICKENS 04/01/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

 Name:
 THOMA, NOCE D
 Name:
 DICKENS, KENNETH J

 Address:
 8117 PARROT DR
 Address:
 15 CHERRY LAUREL CT. #105

 City-St-Zip:
 ORLANDO, FL 32825
 City-St-Zip:
 WINTER SPRINGS, FL 32708

Title: VP () Delete Title: () Change () Addition

 Name:
 HOLLENBACK, BILL
 Name:

 Address:
 121 DUNCAN TR
 Address:

 City-St-Zip:
 LONGWOOD, FL 32779
 City-St-Zip:

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

 Name:
 DICKENS, KENNETH
 Name:
 HASLAM, ALLEN

 Address:
 15 CHERRY LAUREL CT. #105
 Address:
 602 CASA PARK CT 'D'

 City-St-Zip:
 WINTER SPRINGS, FL 32708
 City-St-Zip:
 WINTER SPRINGS, FL 32708

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

 Name:
 IRELAND, CHERYL
 Name:

 Address:
 1009 QUAKER RIDGE CT.
 Address:

 City-St-Zip:
 OVIEDO, FL 32765
 City-St-Zip:

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: KENNETH J DICKENS PD 04/01/2005

Electronic Signature of Signing Officer or Director

Date