

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000816

FILED  
Feb 16, 2010  
Secretary of State

**Entity Name:** SATELLITE BEACH SOCCER CLUB, INC.

**Current Principal Place of Business:**

1089 SOUTH PATRICK DR.  
SATELLITE BEACH, FL 32937 US

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 372615  
SATELLITE BEACH, FL 32937 US

**New Mailing Address:**

**FEI Number:** 59-3388236

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

BERRY, JAMES R  
235 SHERWOOD AVE  
SATELLITE BEACH, FL 32937 US

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

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:**

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** PD  
**Name:** BERRY, JAMES  
**Address:** 235 SHERWOOD AVE  
**City-St-Zip:** SATELLITE BEACH, FL 32937

**Title:** RD  
**Name:** OUELLETTE, SCOTT  
**Address:** 568 HAWKSBILL ISLAND DR  
**City-St-Zip:** SATELLITE BEACH, FL 32937

**Title:** AR  
**Name:** GRAHAM, ANNE  
**Address:** 685 KENWOOD CT  
**City-St-Zip:** SATELLITE BEACH, FL 32937

**Title:** TD  
**Name:** GREISAMER, SALLY  
**Address:** 270 ELLWOOD AVE  
**City-St-Zip:** SATELLITE BEACH, FL 32937

I hereby 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 all other like empowered.

**SIGNATURE:** JAMES R BERRY

MR

02/16/2010

Electronic Signature of Signing Officer or Director

Date