

# **2010 NOT-FOR-PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# N97000004492

**FILED**  
**Jan 22, 2010**  
**Secretary of State**

**Entity Name:** LAKELAND ADULT SOCCER ORGANIZATION, INC.

**Current Principal Place of Business:**

3229 CARLETON PLACE  
LAKELAND, FL 33803

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 621  
LAKELAND, FL 33802

**New Mailing Address:**

**FEI Number:** 59-3565520      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

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

CULLEN, DARAGH  
3229 CARLETON PLACE  
LAKELAND, FL 33803      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:** DARAGH CULLEN

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** CULLEN, DARAGH  
**Address:** 3229 CARLETON PLACE  
**City-St-Zip:** LAKELAND, FL 33803

**Title:** VP  
**Name:** BUCKNER, JUSTIN  
**Address:** 4409 MICANOPE CRES DRIVE  
**City-St-Zip:** LAKELAND, FL 33811

**Title:** T  
**Name:** KING, MONTE  
**Address:** 3020 CROSS FOX DR  
**City-St-Zip:** MULBERRY, FL 33860

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:** DARAGH CULLEN

PRES

01/22/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date