

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004999

FILED
Jul 13, 2004
Secretary of State

Entity Name: PALM HARBOR NIGHTHAWKS SOCCER CLUB, INC.

Current Principal Place of Business:

1968 BAYSHORE BLVD.
DUNEDIN, FL 34698

New Principal Place of Business:

Current Mailing Address:

1968 BAYSHORE BLVD.
DUNEDIN, FL 34698

New Mailing Address:

FEI Number: 59-3462313

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CIANFRONE, JOSEPH R
1968 BAYSHORE BLVD.
DUNEDIN, FL 34698

Name and Address of New Registered Agent:

LARocca, MIKE
PO 691
PALM HARBOR, FL 34682

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: MIKE LARocca

07/13/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: LA ROCCA, MICHAEL
Address: 1986 SPANISH PINE DRIVE
City-St-Zip: DUNEDIN, FL 34698

Title: DV () Delete
Name: DINSMORE, TIM
Address: 3718 WOODRIDGE PL.
City-St-Zip: PALM HARBOR, FL 34684

Title: DTS () Delete
Name: TARLETON, JOHN K
Address: 1659 E ORANGECREST AVE
City-St-Zip: PALM HARBOR, FL 34683

Title: D (X) Delete
Name: CIANFRONE, JOSEPH R
Address: 848 HILLSIDE DR.
City-St-Zip: PALM HARBOR, FL 34683

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: JARDINE, BRET
Address: PO BOX 691
City-St-Zip: PALM HARBOR, FL 34862

Title: () Change () Addition
Name:
Address:
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: MIKE LARocca

D

07/13/2004

Electronic Signature of Signing Officer or Director

Date