FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9700005395 (5)

SOUTHWEST FLORIDA SELECT SOCCER, INC.

						il
Principal Place of Business Mailing Address				t semising min inter jante motte motte motte motte mit brind tilte full fou	ł	
1348 JAMBALA		1348 JAMBALANA	LANE		3. Date Incorporated or Qualified	—
FORT MYERS	FL 33901	FORT MYERS FL	33901		09/22/1997	
						1-1-
2 Principal P	lace of Business	2a. Mailing Addr	200			-
21		26	293		5. Certificate of Status Desired S8.75 Additional	
Suite, Apt. #, etc.		Suite, Apt. #	etc ·		Fee Required	
22		27	GIO.		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
City & State		City & State			7. Is this nonprofit corporation a homeowners association?	
23		28	28		Yes X No	
Zip	Country Zip		Cou	ntry	8. This corporation owes or has paid the current year Intangible	
24	25 29		30		Personal Property Tax due June 30. Yes XNo	
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent	_
				81 Name		
FINCH, NANCY L				82 Street	t Address (P.O. Box Number is Not Acceptable)	
1348 JAMBALANA LANE					r Address (F.O. Box Nathber is Not Acceptable)	
FORT M	YERS FL 33901			83		
				84 City	EI 85 Zip Code	
11. Pursuant to the provisions of Sections 617,0502 and 617,1508. Florida Statutes, the above-named of					corporation submits this statement for the nurpose of changing its registers	<u></u>
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Nam familiar with, and accept the obvious of, Section 617.0503, Florida Statutes.						
signature / Illian Hard Area Congrations of, Section 617.0503, Florida Statutes. SIGNATURE / Illian /						
SIGNATURE	Signature typed or printled name of registers	ed agent and title if at plicable.	(NOTE: Registered	Agent signature	FINICH /-//-98 re required when reinstating) DATE	-
12.		AND DIRECTORS	13.	•	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	DE	.ETE 1.1 TIT	LE	Change Addit	ion .
NAME	FINCH, NANCY L		1.2 NA	MÉ		
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP	FORT MYERS FL 33901			Y-ST-ZIP		
TITLE	VD	☐ DE			UILE PRES. ☑ Change ☐ Additi	OP.
NAME	CALCATERRA, MICHAEL	R	2.2 NA		CALCATERRA MICHAEL R. 4706 SE GAD PLACE	۱
STREET ADDRESS	10.00 19.500 AT 6515 1.45100			REET ADDRESS	4706 SE GAN PLACE	
CITY-ST-ZIP	FORT MYERS FL 33901		1	TY-ST-ZIP	CAPE CORAL, FL 33904	- 1
TITLE	TD	□ DE			DIRECTOR Achange Additi	-
NAME	COMER, MARC		3.2 NA		COMER, MARC	ا '``
STREET ADDRESS	1348 JAMBALANA LANE			REET ADDRESS	4718 FOREST GLENDRIVE	ļ
i	FORT MYERS FL 33901					- 1
CITY-ST-ZIP TITLE	SD SD	DE		Y-ST-ZIP		_
NAME	BROOKS, BEVERLY	L. DE		1	10000 - 1	on
	1348 JAMBALANA LANE		4. 2 NA		Brooks, Beverly	
STREET ADDRESS				IEET ADDRESS	18585 Miami Blud.	ļ
CITY-ST-ZIP	FORT MYERS FL 33901	[7] A.F.		Y-ST-ZIP	FE. Myers, FC 33912	_
TITLE	1	☐ DE		ł	TD Change Addition	מני
NAME			5.2 NAI		Godwin, Michael E. 623 SE 32 DST	
STREET ADDRESS			5.3 STF	EET ADDRESS	013 SE 33 " ST	Ì
CITY-ST-ZIP				Y-ST-ZIP	Cape Cord, Florda 33904]
TITLE		□ DEI	ETE 6.1 TIT!	E	Change Addition	an 🗌

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with any address.

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

59 L FINCH 1-11-98 941.369-3000

FILED

Feb 04 1998 8:00am

Secretary of State