


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # N98000005594 1. Entity Name CLEARWATER HIGH SOCCER BOOSTER CLUB, INC.	
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Principal Place of Business 540 SOUTH HERCULES AVE. CLEARWATER, FL 33764	Mailing Address 1204 JACKSON ROAD CLEARWATER, FL 33755 US
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DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**MELGES, CHARLES
333 MIDWAY ISLAND
CLEARWATER, FL 33767**

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Charles Melges* DATE 4/20/05

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

VOID
04/25/05 04:25:00 003 70.00

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MELGES, CHARLES 333 MIDWAY ISLAND CLEARWATER, FL 33767
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GRAFF, DENISE 1236 WELLINGTON DR CLEARWATER, FL 33764
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD FERRIS, SHERYL 1204 JACKSON ROAD CLEARWATER, FL 33755
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

4/25/05

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Sheryl Ferris* DATE 4/20/05 DAYTIME PHONE # 727 442-7630

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR