2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006344

FILED Jan 04, 2005 Secretary of State

Entity Name: PARKLAND COMPETITIVE SOCCER CLUB, INC.

Current Principal Place of Business: New Principal Place of Business:

5124 NW 66TH LANE PARKLAND, FL 33067

Current Mailing Address: New Mailing Address:

5124 NW 66TH LANE PARKLAND, FL 33067

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired ()

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

COUGHLIN, CASEY W WALLACE, DELROY P

1515 UNIVERSITY DRIVE, SUITE 214 3111 UNIVERSITY DRIVE, SUITE 111 CORAL SPRINGS, FL 33071 US CORAL SPRINGS, FL 33065 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: DELROY P WALLACE 01/04/2005

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition

 Name:
 WALLACE, DELROY
 Name:

 Address:
 5124 NW 66TH LANE
 Address:

 City-St-Zip:
 PARKLAND, FL 33067
 City-St-Zip:

Title: D () Delete Title: D (X) Change () Addition

 Name:
 HOWES, STEVEN
 Name:
 WALLACE, CRAIG R

 Address:
 741 SE 6TH TERR
 Address:
 5124 NW 66 LANE

City-St-Zip: POMPANO BEACH, FL 33060 City-St-Zip: POMPANO BEACH, FL 33067

Title: D () Delete Title: D (X) Change () Addition

 Name:
 ALTER, RICHARD
 Name:
 BRAATHEN, JOANNE C

 Address:
 11160 NW 39TH CT
 Address:
 11544 NW 6 PLACE

 City-St-Zip:
 CORAL SPRINGS, FL 33065
 City-St-Zip:
 CORAL SPRINGS, FL 33071

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: DELROY P WALLACE D 01/04/2005