

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000006344

FILED
Jul 01, 2006
Secretary of State

Entity Name: PARKLAND COMPETITIVE SOCCER CLUB, INC.

Current Principal Place of Business:

5124 NW 66TH LANE
PARKLAND, FL 33067

New Principal Place of Business:

3111 UNIVERSITY DR
CORAL SPRINGS, FL 33065

Current Mailing Address:

5124 NW 66TH LANE
PARKLAND, FL 33067

New Mailing Address:

3111 UNIVERSITY DR
CORAL SPRINGS, FL 33065

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

WALLACE, DELROY P
3111 UNIVERSITY DRIVE, SUITE 111
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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WALLACE, DELROY
Address: 5124 NW 66TH LANE
City-St-Zip: PARKLAND, FL 33067

Title: D () Delete
Name: WALLACE, CRAIG R
Address: 5124 NW 66 LANE
City-St-Zip: POMPANO BEACH, FL 33067

Title: D () Delete
Name: BRAATHEN, JOANNE C
Address: 11544 NW 6 PLACE
City-St-Zip: CORAL SPRINGS, FL 33071

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 Chapter 119, 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 WALLACE

D

07/01/2006

Electronic Signature of Signing Officer or Director

Date