2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001656

Address:

City-St-Zip:

9046 OAK ISLAND LN.

CLERMONT, FL 34711

ntite Names COUTLU AVE COCCED CLU

FILED Jul 03, 2008 Secretary of State

Entity Nai	me: SOUTH LAKE SOCCER CLUB, INC.			
Current Principal Place of Business:		New Principal Place	New Principal Place of Business:	
10029 LK LOUISA RD CLERMONT, FL 34711		SUITE 302	6166 STEVENSON DRIVE SUITE 302 ORLANDO, FL 32835	
Current Mailing Address:		New Mailing Address	New Mailing Address:	
10029 LK LOUISA RD CLERMONT, FL 34711		SUITE 302	6166 STEVENSON DRIVE SUITE 302 ORLANDO, FL 32835	
In accordan	: 59-3567423 FEI Number Applied For() Fice with s. 607.193(2)(b), F.S., the corporation did not related Agent:	•	Certificate of Status Desired () f New Registered Agent:	
O'SHAUGHNESSY, LARRY 10029 LK LOUISA RD CLERMONT, FL 34711 US		KINZLER, JAMES EA 6166 STEVENSON DF SUITE 302	KINZLER, JAMES EA 6166 STEVENSON DRIVE	
	named entity submits this statement for the purpe of Florida.	oose of changing its registered	d office or registered agent, or both,	
SIGNATURE: JAMES KINZLER			07/03/2008	
Electronic Signature of Registered Agent			Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PT () Delete O'SHAUGHNESSY, LARRY 10029 LK LOUISA RD CLERMONT, FL 34711	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VT () Delete GRAFF, MARK 1944 BRANTLEY CIRCLE CLERMONT, FL 34711	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ST () Delete CORL, GENE 820 ELM FOREST DR. MINNEOLA, FL 34715	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	T () Delete GREEN, STEVE	Title: Name:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify 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.

Address:

City-St-Zip:

SIGNATURE: JAMES KINZLER EA 07/03/2008