

2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
May 16, 2007
Secretary of State

DOCUMENT# N99000001936

Entity Name: LAKE COUNTY SOCCER LEAGUE, INC.**Current Principal Place of Business:**803 EAST DIXIE AVE
LEESBURG, FL 34748**New Principal Place of Business:**27341 STATE ROAD 19
TAVARES, FL 32778**Current Mailing Address:**803 EAST DIXIE AVE.
LEESBURG, FL 34748**New Mailing Address:**27341 STATE ROAD 19
TAVARES, FL 32778**FEI Number:****FEI Number Applied For ()****FEI Number Not Applicable (X)****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DAVIS, HUGH A II
803 EAST DIXIE AVE
LEESBURG, FL 34748 US**Name and Address of New Registered Agent:**

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: DAVIS, HUGH A II
Address: 9161 SILVER LAKE DRIVE
City-St-Zip: LEESBURG, FL 34748Title: DVP () Delete
Name: SKOLNIK, ADAM
Address: 1301 BAEZ WAY
City-St-Zip: LADY LAKE, FL 32162Title: DP (X) Delete
Name: NECRON, CHARLIE
Address: 27343 S.R. 19
City-St-Zip: TAVARES, FL 32778**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: DP (X) Change () Addition
Name: NEGRON, JUAN
Address: 27341 STATE ROAD 19
City-St-Zip: TAVARES, FL 32778Title: DVP (X) Change () Addition
Name: BUCKNER, MARK H
Address: 6986 LAKE OLA DRIVE
City-St-Zip: MOUNT DORA, FL 32757Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: MARK H BUCKNER

DVP

05/16/2007

Electronic Signature of Signing Officer or Director

Date