


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 91005 008 ****61.25

DOCUMENT # N99000004013 1. Entity Name BONITA SPRINGS YOUTH SOCCER ASSOCIATION, INC.																																																																																						
Principal Place of Business 25334 PINSON DR. BONITA SPRINGS, FL 34135			Mailing Address 24721 BAYBEAN COURT BONITA SPRINGS, FL 34134																																																																																			
2. Principal Place of Business		3. Mailing Address P.O. Box 1627																																																																																				
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																																																				
City & State		City & State Bonita Springs, FL		4. FEI Number 59-3585635																																																																																		
Zip		Country		Applied For <input type="checkbox"/> Not Applicable																																																																																		
34133		USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																																																		
6. Name and Address of Current Registered Agent MASON, CAMERSON 25334 PINSON DR. BONITA SPRINGS, FL 34135				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>																																																																																		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																						
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees																																																																																		
Make check payable to Florida Department of State																																																																																						
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 10. 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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: <u>Robin Ewell</u> Robin Ewell 4/20/04 235-445-8163 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																						