

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005422

FILED  
May 05, 2010  
Secretary of State

**Entity Name:** WEST PINES UNITED FUTBOL CLUB, INC.

**Current Principal Place of Business:**

1038 S.W. 191ST LANE  
PEMBROKE PINES, FL 33029

**New Principal Place of Business:**

**Current Mailing Address:**

P O BOX 821443  
PEMBROKE PINES, FL 33082

**New Mailing Address:**

**FEI Number:** 65-0949896      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**  
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:**

DUBREUZE, MIRLENE E  
13566 NW 7TH COURT  
PEMBROKE PINES, FL FL      US

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

GOODMAN, TODD  
1038 S.W. 191ST LANE  
PEMBROKE PINES, FL FL      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: TODD GOODMAN

05/05/2010

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: GOODMAN, TODD  
Address: 1038 SW 191ST LANE  
City-St-Zip: PEMBROKE PINES, FL 33029

Title: TD  
Name: JOBSON, RICHARD  
Address: 16184 SW 16TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33027

Title: SD  
Name: DUBREUZE, MIRLENE E  
Address: 13566 NW 7TH COURT  
City-St-Zip: PEMBROKE PINES, FL 33028

Title: D  
Name: PEDRAZA, SUSANA  
Address: 1080 ROCK HILL AVENUE  
City-St-Zip: DAVIE, FL 33325

Title: D  
Name: DAL FARRA, PAOLO  
Address: 15840 SW 49 COURT  
City-St-Zip: MIRAMAR, FL 33027

Title: D  
Name: SMITH, WAYNE I  
Address: 951 SW 98TH TERRACE  
City-St-Zip: PEMBROKE PINES, FL 33025

I hereby 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 all other like empowered.

SIGNATURE: MIRLENE E DUBREUZE

SD

05/05/2010

Electronic Signature of Signing Officer or Director

Date