

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006248

FILED
Jan 05, 2004
Secretary of State

Entity Name: SOCCER OUTREACH INTERNATIONAL, INC.

Current Principal Place of Business:

20845 YAM STREET
ORLANDO, FL 32833

New Principal Place of Business:

Current Mailing Address:

20845 YAM STREET
ORLANDO, FL 32833

New Mailing Address:

FEI Number: 59-3603861

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLEMAN, TIM W
20845 YAM STREET
ORLANDO, FL 32833 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: ED () Delete
Name: COLEMAN, TIM
Address: 20845 YAM STREET
City-St-Zip: ORLANDO, FL 32833

Title: D () Delete
Name: WILLIAMS, JOHN
Address: PO BOX 2066
City-St-Zip: BIRMINGHAM, AL 35201

Title: D () Delete
Name: WAXER, EDDIE
Address: PO BOX 2607
City-St-Zip: BONITA SPRINGS, FL 34133

Title: D () Delete
Name: CROMWELL, AMANDA
Address: 325 OAK LEAF CIRCLE
City-St-Zip: LAKE MARY, FL 32746

Title: D () Delete
Name: JACKSON, WESS
Address: 6900 SOUTH GRAY ROAD
City-St-Zip: INDIANAPOLIS, IN 46237

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:

Title: D (X) Change () Addition
Name: CROMWELL, AMANDA
Address: PO BOX 163555
City-St-Zip: ORLANDO, FL 32816

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 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 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: TIM COLEMAN

ED

01/05/2004

Electronic Signature of Signing Officer or Director

Date