## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000116959

Entity Name: SUCCESS IN SOCCER CAMPS, INC.

FILED Apr 17, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

6615 MAGNOLIA POINT DRIVE 2720 COASTAL RANGE WAY LAND O LAKES, FL 34637

LUTZ, FL 33559

**Current Mailing Address: New Mailing Address:** 

6615 MAGNOLIA POINT DRIVE 2720 COASTAL RANGE WAY

LAND O LAKES, FL 34637 LUTZ, FL 33559

FEI Number: 56-2299996 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

LAUREN, KIEFER LAUREN, KIEFER 6615 MAGNOLIA POINT DRIVE 2720 COASTAL RANGE WAY LAND O LAKES, FL 34637 LUTZ, FL 33559

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: LAUREN KIEFER 04/17/2007

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition () Delete Title:

KIEFER, GEORGE R KIEFER, GEORGE R Name: Name: 6615 MAGNOLIA POINT DRIVE 2720 COASTAL RANGE WAY Address: Address:

City-St-Zip: LAND O LAKES, FL 34637 City-St-Zip: LUTZ, FL 33559

( ) Delete Title: Title: VΡ (X) Change ( ) Addition KIEFER, LAUREN S Name: KIEFER, LAUREN S Name:

6615 MAGNOLIA POINT DRIVE Address: 2720 COASTAL RANGE WAY Address:

LAND O LAKES, FL 34637 LUTZ, FL 33559 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

VΡ SIGNATURE: LAUREN KIEFER 04/17/2007