


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2005 8:00 am
Secretary of State

04-18-2005 90317 050 ***150.00

DOCUMENT # P04000087063 1. Entity Name NORTH FLORIDA SOCCER ACADEMY, INC.					
Principal Place of Business 1536 WALNUT CREEK DRIVE ORANGE PARK, FL 32003			Mailing Address 1536 WALNUT CREEK DRIVE ORANGE PARK, FL 32003		
2. Principal Place of Business 2583 Countryside Dr. Suite, Apt. #, etc.		3. Mailing Address 2583 Countryside Dr. Suite, Apt. #, etc.			
City & State Orange Park, FL Zip 32003		City & State Orange Park, FL Zip 32003		4. FEI Number 20-1199784	
Country USA		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SMITH HULSEY & BUSEY 225 WATER STREET, SUITE 1800 JACKSONVILLE, FL 32202				7. Name and Address of New Registered Agent Name Michael Pickett Street Address (P.O. Box Number is Not Acceptable) 2583 Countryside Drive City Orange Park	
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.				DATE 4/11/05	
SIGNATURE: Michael Pickett <i>Michael Pickett</i> <small>Signature, typed or printed name of registered agent and title if applicable.</small>				(NOTE: Registered Agent signature required when reinstating)	
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			TITLE NAME STREET ADDRESS CITY-ST-ZIP		
<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
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<input type="checkbox"/> Delete			<input type="checkbox"/> Change <input type="checkbox"/> Addition		
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 607, 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: Michael Pickett <i>Michael Pickett</i> 4/11/05 904-707-7191 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					

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