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FILED
Jun 22, 2001 8:00 am
Secretary of State
05-24-2001 90495 037 ***150.00

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P96000005430

1. Entity Name

AUBURN SOCCER CAMP, INC.

(UA)

Principal Place of Business	Mailing Address
AUBURN SOCCER OFFICE- KAREN RICHTER PO BOX 351 AUBURN AL 36831-0351	AUBURN SOCCER OFFICE- KAREN RICHTER PO BOX 351 AUBURN AL 36831-0351

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3366850 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
RICHTER, KAREN I ~~8609 GEORGIA TECH STREET~~ ~~1225 Grove Park~~ ~~ORLANDO FL 32817~~ ~~Auburn, AL 36830~~	Name Street Address (P.O. Box Number is Not Acceptable) ~~1225 Grove Park~~ 720 N. Maitland Av. Ste 105 Maitland, FL 32751 City ~~Auburn, AL~~ FL Zip Code ~~36830~~

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.

SIGNATURE [signature] Karen Richter President 5/1/01
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐	FILE NOW!! FEE IS $150.00 After MAY 1, 2001 Fee will be $550.00 Make Check Payable to Department of State	10. Election Campaign Financing Trust Fund Contribution. ☐	$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP RICHTER, KAREN I ~~8609 GEORGIA TECH ST.~~ ~~ORLANDO FL 32817~~ ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Richter 1225 Grove Park Auburn, AL 36830 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V MATTHEW, MOTT ~~2527 ABALONE BLVD.~~ ~~ORLANDO FL 32833~~ ☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Mott 806 Tullahoma DR Auburn, AL 36830 ☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
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CR2E034 (10/00)

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] 5/1/01 334-844-9773
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #