

2000 UNIFORM BUSINESS REPORT (UBR)

4/2

DOCUMENT # P97000053139

1. Entity Name

FLORIDA SOCCER, INC.

FILED
May 24, 2000 8:00 am
Secretary of State

04-26-2000 90147 020 ***150.00

Principal Place of Business

Mailing Address

4560 FRANCISCO RD
PENSACOLA FL 32504

4560 FRANCISCO RD
PENSACOLA FL 32504

2. Principal Place of Business

3. Mailing Address

1581 Bulevar Menor

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State
Pensacola Beach FL

Zip

Country

Zip
32561

Country

Escambia



DO NOT WRITE IN THIS SPACE

59-3452252

4. FEI Number

APPLIED FOR

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

MAYS, STRICKER
4560 FRANCISCO RD
PENSACOLA FL 32504

Name

MAYS, STRICKER

Street Address (P.O. Box Number is Not Acceptable)

1581 BULEVAR MENOR

City

PENSACOLA BEACH

FL

Zip Code

32561

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

STRICKER MAYS

Stricker Mays

2/8/00

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, 2000 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	PDS	<input type="checkbox"/> Delete
NAME	MAYS, STRICKER	
STREET ADDRESS	4560 FRANCISCO RD	
CITY-ST-ZIP	PENSACOLA FL 32504	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	POWERS, ROLAND	
STREET ADDRESS	2005 SALT MYRTLE LANE	
CITY-ST-ZIP	ORANGE PARK FL 32073	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	1581 BULEVAR MENOR	
STREET ADDRESS	PENSACOLA BEACH, FL	
CITY-ST-ZIP	32561	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

Stricker Mays

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/8/00

Date

850-433-0701

Daytime Phone #

CR2E034 (9/99)