## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P99000025503

Entity Name: THREE LIONS SOCCER TRAINING ACADEMY, INC.

FILED Apr 21, 2008 Secretary of State

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

8670 SOUTH TROPICAL TRAIL 2108 GRANT PLACE MERRIT ISLAND, FL 32952

APT#6

MELBOURNE, FL 32901

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

8670 SOUTH TROPICAL TRAIL 2108 GRANT PLACE MERRIT ISLAND, FL 32952

APT#6

MELBOURNE, FL 32901

ARMSTRONG, ANNETTE M

2108 GRANT PLACE

FEI Number: 59-3566302 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:

ARMSTRONG, ANNETTE M 8670 SOUTH TROPICAL TRAIL

MERRIT ISLAND, FL 32952 APT#6 MELBOURNE, FL 32901 US

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: 04/21/2008

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

MERRIT ISLAND, FL 32952

## **OFFICERS AND DIRECTORS:**

Title: () Delete ARMSTRONG, ANNETTE Name: 8670 SOUTH TROPICAL TRAIL Address:

( ) Delete Title: ARMSTRONG, SCOTT Name: 2012 GRANT PL. #14 Address: MELBOURNE, FL 32901

City-St-Zip:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: (X) Change ( ) Addition ARMSTRONG, ANNETTE Name: Address:

2108 GRANT PLACE APT #6 City-St-Zip: MELBOURNE, FL 32901

Title: VΡ (X) Change ( ) Addition

Name: ARMSTRONG, SCOTT Address: 2108 GRANT PLACE APT #6 MELBOURNE, FL 32901 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: SCOTT ARMSTRONG 04/21/2008