

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 730730

Entity Name: CAPE CORAL SOCCER ASSOCIATION, INC.**Current Principal Place of Business:**PELICAN SOCCER COMPLEX
4020 SW 2ND CT
CAPE CORAL, FL 33914**Current Mailing Address:**P O BOX 100732
CAPE CORAL, FL 33910 US**FEI Number:** 59-2610047**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BELCHER, II, WILLIAM GESQ
1375 JACKSON STREET, SUITE 303
FORT MYERS, FL 33901 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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRESIDENT
Name	BEVINGTON, JOSH
Address	P O BOX 100732
City-State-Zip:	CAPE CORAL FL 33910

Title	S
Name	WEBER-MOLDAWSKY, KATHY
Address	P O BOX 100732
City-State-Zip:	CAPE CORAL FL 33910

Title	VP
Name	VOLBERG JR, LEONARD
Address	P O BOX 100732
City-State-Zip:	CAPE CORAL FL 33910

Title	PAST PRESIDENT, TREASURER
Name	SMITH-HUNTER, CATHY
Address	PELICAN SOCCER COMPLEX 4020 SW 2ND CT
City-State-Zip:	CAPE CORAL FL 33914

Title	RECREATIONAL COMMISSIONER
Name	WOLFE, CONNIE
Address	PELICAN SOCCER COMPLEX 4020 SW 2ND CT
City-State-Zip:	CAPE CORAL FL 33914

I hereby 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: JOSH BEVINGTON

PRESIDENT

01/30/2019

Electronic Signature of Signing Officer/Director Detail_____
Date