

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 760179

Entity Name: WEST CITRUS SOCCER CLUB, INC.**Current Principal Place of Business:**4510 S. GRANDMARCH A.
HOMOSASSA, FL 34446**Current Mailing Address:**PO BOX 975
HOMOSASSA SPRINGS , FL 34447 US**FEI Number:** 59-2445681**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CALLAWAY, MICHAEL
622 WEST STAR JASMINE PLACE
BEVERLY HILLS, FL 34465 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:** MICHAEL D. CALLAWAY

01/21/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title SECRETARY
Name PERMENTER, JENNIFER
Address PO BOX 975
City-State-Zip: HOMOSASSA FL 34447

Title VP - COMPETITIVE
Name JOSEPH, LOIERO
Address PO BOX 975
City-State-Zip: HOMOSASSA FL 34447

Title COMMISSIONER
Name NAVARRO, VICTORIA
Address PO BOX 975
City-State-Zip: HOMOSASSA FL 34447

Title DIRECTOR AT LARGE
Name DANBACK, LINDSAY
Address PO BOX 975
City-State-Zip: HOMOSASSA FL 34447

Title REGISTRAR
Name HOUCK, ELICIA
Address PO BOX 975
City-State-Zip: HOMOSASSA FL 34447

Title DIRECTOR OF COACHING
Name ROSE, DARREL
Address PO BOX 975
City-State-Zip: HOMOSASSA FL 34447

Title EQUIPMENT DIRECTOR
Name HOLT, TRISHA
Address PO BOX 975
City-State-Zip: HOMOSASSA FL 34447

Title TEAM PARENT DIRECTOR
Name GLEN, JERICA
Address PO BOX 975
City-State-Zip: HOMOSASSA FL 34447

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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: JANNA HAMPTON

BOOKKEEPER

01/21/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title MEMBER AT LARGE
Name POSTA, ALEX
Address PO BOX 975
City-State-Zip: HOMOSASSA FL 34447

Title VP RECREATIONAL
Name CALLAWAY, MICHAEL
Address PO BOX 975
City-State-Zip: HOMOSASSA FL 34447

Title FIELD DIRECTOR
Name GORDON, ANDREW
Address PO BOX 975
City-State-Zip: HOMOSASSA FL 34447

Title BOOKKEEPER
Name HAMPTON, JANNA
Address PO BOX 975
City-State-Zip: HOMOSASSA SPRINGS FL 34447