

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N14000001026

Entity Name: OAKLEAF SOCCER INC.**Current Principal Place of Business:**9526 ARGYLE FOREST BLVD.
SUITE B2 #409
JACKSONVILLE, FL 32222**Current Mailing Address:**9526 ARGYLE FOREST BLVD.
SUITE B2 #409
JACKSONVILLE, FL 32222**FEI Number:** NOT APPLICABLE**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**UNITED STATES CORPORATION AGENTS, INC.
13302 WINDING OAKS BLVD.
SUITE A
TAMPA, FL 33612 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:** JMC

07/08/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	PD
Name	SEARCY, KIRSTIE
Address	9526 ARGYLE FOREST BLVD. #B2 #409
City-State-Zip:	JACKSONVILLE FL 32222

Title	SD
Name	LANIER, ANDRE
Address	9526 ARGYLE FOREST BLVD. #B2 #409
City-State-Zip:	JACKSONVILLE FL 32222

Title	TD
Name	CARTER, JASON
Address	9526 ARGYLE FOREST BLVD. #B2 #409
City-State-Zip:	JACKSONVILLE FL 32222

Title	D
Name	RIPP, JOSH
Address	9526 ARGYLE FOREST BLVD. #B2 #409
City-State-Zip:	JACKSONVILLE FL 32222

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: JASON CARTER

TREASURER

07/08/2016

Electronic Signature of Signing Officer/Director Detail

Date