

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 727617

FILED
Jan 07, 2011
Secretary of State

Entity Name: THE UNITED STATES DENTAL TENNIS ASSOCIATION, INC.

Current Principal Place of Business:

1096 WILMINGTON AVE
SAN JOSE, CA 95129 US

New Principal Place of Business:

Current Mailing Address:

1096 WILMINGTON AVE
SAN JOSE, CA 95129 US

New Mailing Address:

FEI Number: 23-7313401

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KENWORTHY, D.J. DDS
3931 BAY SHORE ROAD
SARASOTA, FL 34234 US

Name and Address of New Registered Agent:

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

OFFICERS AND DIRECTORS:

Title: 1STO
Name: WALLACE, JEFF
Address: 74 GRAFTON RD.
City-St-Zip: TOWNSHEND, VT 05353 US

Title: VP
Name: FONG, JOHN
Address: 1788 SUTTER STREET, SUITE 201
City-St-Zip: SAN FRANCISCO, CA 94115 US

Title: 2ND
Name: MORSHED, NOUSHIN
Address: 1244 7TH STREET
City-St-Zip: SANTA MONICA, CA 90401 US

Title: P
Name: KASPERS, ROBERT
Address: 2515 THE STRAND
City-St-Zip: NORTHBROOK, IL 60062 US

Title: ST
Name: BIGGS, ANDREW
Address: 3810 W. CENTER LANE
City-St-Zip: SPOKANE, WA 99208 US

Title: ED
Name: LEE, CORI
Address: 1096 WILMINGTON AVE.
City-St-Zip: SAN JOSE, CA 95129 US

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: CORINNE LEE

ED

01/07/2011

Electronic Signature of Signing Officer or Director

Date