

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 12, 2003 8:00 am
Secretary of State

03-12-2003 90109 048 ****61.25

DOCUMENT # 750323

1. Entity Name

TENNIS VILLAGE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

P.O. BOX 1295
TITUSVILLE FL 32781-1295
US

Mailing Address

P.O. BOX 1295
TITUSVILLE FL 32781-1295
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number **59-2372525**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MATHENY, JOE D
335 INDIAN RIVER AVENUE
TITUSVILLE FL 32796

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE*	P	☒ Delete
NAME	BECKWITH, RUSSELL	
STREET ADDRESS	1770 S PARK AVENUE	
CITY-ST-ZIP	TITUSVILLE FL 32780	
TITLE	VP	☒ Delete
NAME	HARRIS, PAUL	
STREET ADDRESS	1840 S PARK AVENUE	
CITY-ST-ZIP	TITUSVILLE FL 32780	
TITLE	D	☐ Delete
NAME	HOEY, RONALD	
STREET ADDRESS	1684 S PARK AVENUE	
CITY-ST-ZIP	TITUSVILLE FL 32780	
TITLE	D	☒ Delete
NAME	LEE, THOMAS	
STREET ADDRESS	1662 S PARK AVENUE	
CITY-ST-ZIP	TITUSVILLE FL 32780	
TITLE	D	☐ Delete
NAME	FERRENTINO, DOMINICK	
STREET ADDRESS	1844 S. PARK AVENUE	
CITY-ST-ZIP	TITUSVILLE FL 32780	
TITLE	D	☒ Delete
NAME	KNAPP, BENJAMIN	
STREET ADDRESS	1762 S. PARK AVENUE	
CITY-ST-ZIP	TITUSVILLE FL 32780	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	☐ Change ☒ Addition
NAME	SCALISE, JOHN R.	
STREET ADDRESS	1704 S. PARK AVE	
CITY-ST-ZIP	TITUSVILLE, FL 32780	
TITLE	VP	☐ Change ☒ Addition
NAME	ELIZABETH MELVIN	
STREET ADDRESS	1672 S. PARK AVE	
CITY-ST-ZIP	TITUSVILLE, FL 32780	
TITLE	T	☐ Change ☒ Addition
NAME	DONNA GLIDEWELL	
STREET ADDRESS	1716 S. PARK AVE	
CITY-ST-ZIP	TITUSVILLE, FL 32780	
TITLE	S	☒ Change ☐ Addition
NAME	DOMINICK FERRENTINO	
STREET ADDRESS	1844 S. PARK AVE	
CITY-ST-ZIP	TITUSVILLE, FL 32780	
TITLE	D	☐ Change ☒ Addition
NAME	CYNTHIA LUSTER	
STREET ADDRESS	1836 S. PARK AVE.	
CITY-ST-ZIP	TITUSVILLE, FL 32780	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *John R. Scalise* **REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

09 MAR 03

CR2E037 (10/02)