

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000000267

FILED
Jan 22, 2007
Secretary of State

Entity Name: NORTH PALM BEACH COUNTY WOMEN'S TENNIS ASSOCIATION, INC.

Current Principal Place of Business:

5390 PENNOCK POINT RD.
JUPITER, FL 33458

New Principal Place of Business:

1769 FLAGLER MANOR CIRCLE
WEST PALM BEACH, FL 33411

Current Mailing Address:

5390 PENNOCK POINT RD.
JUPITER, FL 33458

New Mailing Address:

1769 FLAGLER MANOR CIRCLE
WEST PALM BEACH, FL 33411

FEI Number: 65-0500016

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATHEWS, GEORGE W III
1325 S CONGRESS AVE, 1325
BOYNTON BEACH, FL 33426 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: VPD () Delete
Name: POLLOCK, KATHY
Address: 15619 62ND TERR. N
City-St-Zip: PALM BEACH GARDENS, FL 33418

Title: PD () Delete
Name: MENG, BOBBI
Address: 5390 PENNOCK POINT DR.
City-St-Zip: JUPITER, FL 33458

Title: S () Delete
Name: EWOLDT, TINA
Address: 4460 RIVER PINES CT
City-St-Zip: TEQUESTO, FL 33469

Title: TD () Delete
Name: EVELYN, SHEILA
Address: 1300 WOOD ROW WAY
City-St-Zip: WELLINGTON, FL 33414

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: TRIMPER, DIANE
Address: 585 GARDINER LANE
City-St-Zip: JUPITER, FL 33458

Title: PD (X) Change () Addition
Name: DUNCAN, CATHY
Address: 1769 FLAGLER MANOR CIRCLE
City-St-Zip: WEST PALM BEACH, FL 33411

Title: S (X) Change () Addition
Name: EWOLDT, TINA
Address: 4460 RIVER PINES CT
City-St-Zip: JUPITER, FL 33469

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SHEILA EVELYN

TD

01/22/2007

Electronic Signature of Signing Officer or Director

Date