

2000 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # N99000005402**

1. Entity Name

JIMMY EVERT TENNIS CENTER ADVISORY BOARD, INC.**FILED**
Jan 19, 2000 8:00 am
Secretary of State

01-19-2000 90162 018 ****61.25

Principal Place of Business

Mailing Address

**701 N.E. 12TH AVENUE
FORT LAUDERDALE FL 33304****701 N.E. 12TH AVENUE
FORT LAUDERDALE FL 33304-2829**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0951325

Applied For

Not Applicable

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required**C0006283**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent**MOHNANI, LAKHI L
701 N.E. 12TH AVENUE
FORT LAUDERDALE FL 33304****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.

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
Department of State****10. OFFICERS AND DIRECTORS**TITLE **D** ☐ Delete
NAME **EVERT, JIMMY**
STREET ADDRESS **2401 SUNRISE KEY BLVD.**
CITY-ST-ZIP **FORT LAUDERDALE FL 33304**TITLE **D** ☐ Delete
NAME **MOHNANI, LAKHI**
STREET ADDRESS **40 ISLA BAHIA DRIVE**
CITY-ST-ZIP **FORT LAUDERDALE FL 33316**TITLE **D** ☐ Delete
NAME **ARNOLD, DANIEL S JR.**
STREET ADDRESS **2916 CENTER AVENUE**
CITY-ST-ZIP **FORT LAUDERDALE FL 33308**TITLE **D** ☐ Delete
NAME **T. WHITNEY KRAFT**
STREET ADDRESS **3351 N.E. 19TH AVENUE**
CITY-ST-ZIP **FORT LAUDERDALE FL 33308**TITLE **D** ☐ Delete
NAME **MILLETTE, JODI**
STREET ADDRESS **5891 N.E. 21ST ROAD**
CITY-ST-ZIP **FORT LAUDERDALE FL 33308**TITLE **D** ☐ Delete
NAME **HALL, JAMES**
STREET ADDRESS **1624 E. LAKE DRIVE**
CITY-ST-ZIP **FORT LAUDERDALE FL 33316****11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**TITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
STREET ADDRESS
CITY-ST-ZIPTITLE ☐ Change ☐ AdditionNAME
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)