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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **745221** **(2)**

1. Corporation Name
TENNIS LODGES #1 CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
CHERYL HOSTE, PCAM, DISTINCTIVE HOMES 12765 W. FOREST HILL SUITE 1302 WELLINGTON FL 33414 US	CHERYL HOSTE, PCAM, DISTINCTIVE HOMES 12765 W. FOREST HILL SUITE 1302 WELLINGTON FL 33414 US

3. Date Incorporated or Qualified: 12/12/1978

4. FEI Number: 59-1877098 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 c/o Wellington Management, Inc.	26 c/o Wellington Management, Inc.
Suite, Apt. #, etc. 22 12785-C Forest Hill Blvd.	Suite, Apt. #, etc. 27 12785-C Forest Hill Blvd.
City & State 23 Wellington, FL	City & State 28 Wellington FL.
Zip 24 33414 Country 25 USA	Zip 29 33414 Country 30 USA

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

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
NELSON, MICHAEL DISTINCTIVE HOMES 12765 W. FOREST HILL SUITE 1302 WELLINGTON FL 33414	81 Name: John Newsome 82 Street Address (P.O. Box Number is Not Acceptable): Wellington Management, Inc. 83: 12785-C Forest Hill Blvd. 84 City: Wellington FL 85 Zip Code: 33414

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE: _____ John Newsome 1-12-98
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	KEMPLIN, RAY		1.2 NAME		
STREET ADDRESS	12765 W FOREST HILL BLVD #1302		1.3 STREET ADDRESS		
CITY-ST-ZIP	WELLINGTON FL		1.4 CITY-ST-ZIP		
TITLE	VPD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	PUFFER, JIM		2.2 NAME		
STREET ADDRESS	11863 WIMBLEDON CIR 102-I		2.3 STREET ADDRESS		
CITY-ST-ZIP	W PALM BCH FL		2.4 CITY-ST-ZIP		
TITLE	TD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	ABOUZEID, SANDY		3.2 NAME		
STREET ADDRESS	11863 WIMBLEDON CIRCLE, #102-A		3.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL		3.4 CITY-ST-ZIP		
TITLE	PD	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	SMITH, ROBERT		4.2 NAME		
STREET ADDRESS	11863 WIMBLEDON #550		4.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL		4.4 CITY-ST-ZIP		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	MILLER, MARLENE		5.2 NAME		
STREET ADDRESS	11863 WIMBLEDON SUITE 505		5.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL		5.4 CITY-ST-ZIP		
TITLE	AS	☑ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	NELSON, MICHAEL		6.2 NAME		
STREET ADDRESS	12765 W FOREST HILL BLVD #1302		6.3 STREET ADDRESS		
CITY-ST-ZIP	WELLINGTON FL		6.4 CITY-ST-ZIP		

CR2E037 (10/97)

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ James C Puffer 3-30-98